Western Connecticut State University

Substantive Change Application

New Degree: Doctor of Nurse Practitioner

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Introduction

Western Connecticut State University seeks approval to offer a Doctor of Nursing Practice degree. Building on an already strong nursing portfolio that includes:

RN-to-BSN: Allowing students who start at the community colleges to complete the BS in Nursing. WCSU has a long established partnership with Naugatuck Valley Community College, where we have an office and deliver some components of the curriculum.

BS Nursing: A highly sought after four-year degree with a history of strong results on NCLEX.

MS Nursing: Advanced Practice Nurse Practitioner with population foci on gerontology and most recently Psychology/Mental Health and Acute Care.

Ed.D. Nursing: Offered fully online and shared with Southern Connecticut State University. Our graduates are serving as nurse educators throughout Connecticut.

The move to offer the DNP will allow us to continue to meet the needs of our constituents, as they move into leadership roles in hospitals, clinics, and education. It also allows us to prepare for the looming change in degree requirements for Nurse Practitioners.

Preparation for this degree began two years ago. Developed by faculty in the Department of Nursing (DON), we invested in curriculum development, and progressed through our normal governance review in 2018-2019. We gained approval by the Board of Regents in fall 2019, and informed NECHE of our intent to submit this proposal on October 15, 2019. This document has been prepared by DON faculty, the Dean of the School of Professional Studies, and the Provost and Vice President for Academic Affairs. Our intended launch of the DNP is fall 2021.

In the pages that follow, you will find evidence of our preparation for this degree, how it fits into WCSU's strategic plan, and our overall goal of financial sustainability. We are excited to expand our graduate offerings and believe that we are poised for a successful launch of this degree.

Standard 1: Mission and Purposes

In 2017, the Connecticut Board of Regents approved Western Connecticut State University's newest mission statement. This statement was developed as part of the strategic planning process and was thoroughly reviewed by a wide array of university constituents, including students, faculty, administration, and members of the surrounding community. The resulting statement is as follows:

Western Connecticut State University changes lives by providing all students with a high quality education that fosters their growth as individuals, scholars, professionals, and leaders in a global society. To achieve this, we

1. *Offer undergraduate and graduate programs that weave together liberal arts and professional education and instill a desire for life-long learning.*
2. *Sustain a vibrant, inclusive campus that connects individuals through co-curricular programs, cultural events, and service to the community.*
3. *Attract student-centered faculty who are passionate teachers and accomplished scholars.*
4. *Establish partnerships that create opportunities for internships, research, and experiential learning.*

This statement was approved by the University Senate and appears on the president's page https://www.wcsu.edu/president/vision-principles/, on the strategic planning pages https://www.wcsu.edu/strategicplan/new-mission-values-and-vision/ , the undergraduate catalog https://catalogs.wcsu.edu/ugrad1920/introduction-to-western/, graduate catalog https://catalogs.wcsu.edu/grad1920/introduction-to-western/.

Central to this mission is the weaving together of liberal arts and professional education while fostering opportunities for continued growth for our students. Increasing graduate opportunities is one way to support that continued growth and has emerged as a critical part of our strategic plan.

Long recognized as one of WCSU's outstanding programs, the Department of Nursing (DON) exemplifies the university mission through its commitment to "preparing beginning and advanced nurses to meet the ever-changing health care needs of Connecticut and the surrounding region." Offering undergraduate options (BS in Nursing), transfer degree options (RN-to-BSN), the MS in Nursing (Advanced Practice Nurse Practitioner in Gerontology and Psych Mental Health), and the Ed.D. in Nursing Education, the DON is clearly trying to meet the ever-changing needs of the region. (https://catalogs.wcsu.edu/ugrad1920/sps/programs/nursing/)

The Doctorate of Nurse Practitioner (DNP) degree continues this mission by providing the most advanced credential for nurse practitioners, furthering their opportunities to serve as leaders in many clinical settings, by expanding their applied research and leadership skills in support the rapidly expanding responsibilities of nurse practitioners.

This is summed up in the mission of the DNP program

The Doctor of Nursing Practice prepares advanced practice nurses to meet the societal and global changes of health care, while fostering the growth of individuals, scholars, and professionals in their pursuit of lifelong learning. We achieve this by offering a student-centered curriculum that addresses the diverse needs of both students and the community through scholarship, research, and clinical opportunities that serve the community and the profession. We maintain our commitment to a caring culture with respect to our patients, students, and practice partners in all that we do.

Standard 2: Planning and evaluation

Western Connecticut State University has a robust set of planning and evaluation strategies to ensure the quality of degree offerings, regional fit/demand for programs, and financial sustainability. Most of these policies have been developed through university governance, with additional standards suggested by the Board of Regents, and in keeping with the CSU-AAUP Collective Bargaining Agreement. They are as follows:

Assessment
All programs have assessment plans, which are used to review and improve curriculum on annual or biannual bases. The Department of Nursing has internal committees to oversee evaluation of their programs. The department evaluates all courses each semester which includes student feedback through Student Opinion Surveys. The department also conducts an exit survey for all programs, as wells as alumni and employer surveys one year post-graduation.

Where appropriate, external exams help to determine the success of our academic programs (NCLEX, Applied Behavior Analysis, Major Fields Tests). These help with determining whether we are meeting broader standards defined by the field. Since the American Nurses Credentialing Center (ANCC), American Association of Colleges of Nursing (AACN) or American Association of Nurse Practitioners (AANP) exam is required for certification, we will be monitoring students' performance on these exams, as part of our program assessment process.

Discipline Specific Accreditation
Several programs at the university hold additional accreditations beyond NECHE (AACSB, CAEP, CCNE, NASM, NASAD, NAST, etc.). The DNP was developed in line with the standards CCNE and the description of Advanced Practice Nursing put forward by American Association of Colleges of Nursing

(AACN). The Department of Nursing will also be applying to have the DNP accredited by the Commission on Collegiate Nursing Education (CCNE).

Academic Program Review

All programs at the university are subject to periodic program review (7 years minimum, more frequently if meeting discipline specific accreditation standards). This process (codified in the Faculty Handbook), reviews academic quality (assessment), enrollment trends, adequacy of staffing and facilities, and requires planning for the future. Program review reports are reviewed by Deans, University Governance, the Provost/VPAA, and the Board of Regents. (Program Review Policy in Appendix A)

The CSU-AAUP Collective Bargaining Agreement sets minimum standards for faculty credentials, with terminal degrees being strongly preferred. Departments evaluate the credentials of all faculty teaching in the discipline, and they are verified by Human Resources. For the DNP, credential requirements faculty are defined by CCNE. (Participating faculty members and their credentials in Appendix B).

Board of Regents Review

Finally, the BOR-CT requires all proposals for new programs to include evidence for projected enrollments, plans for marketing new degrees, and a three-year budget. New programs are reviewed again, considering the projected targets, after those three-years, to determine the success of that program. Programs, new and old, are monitored for low-enrollments/low completion rates and any program not performing as planned is required to develop a plan for improvement or consider closing. (BOR Licensure and Accreditation Policies Appendix C, Low Completer Policy Appendix D).

Financial Viability

WCSU is currently following a Strategic Plan approved in 2017, which includes financial sustainability as one of the goals. Part of achieving that goal is to identify programs that meet the needs of all students, which has led to a larger emphasis on graduate programs. In addition, there is a heightened focus on enrollment patterns, (aligned with BOR policy), so all new programs must develop a strong case for projected demand.

For the DNP, the following information was gathered to determine the potential demand for the degree:

In 2015, Connecticut League for Nursing (CLN) released a report on full-time and part-time nursing faculty with doctorate degrees. This report showed that only 48% of nursing faculty teaching in academic institutions in Connecticut had earned a doctorate. This report is concerning because entry-level faculty positions usually require doctorate degrees to teach in nursing. According to Jobs EQ, the need for nursing faculty in Connecticut will increase by 3.4% and in the larger region (NY, NJ, PA, and CT) that number is at 2.5% over the next 7 years. The DNP is one of the three credentials that can support the development of qualified teaching faculty. (Jobs EQ Report Appendix E)

In addition to staffing nursing education programs, a 2016 report from the US Bureau of Labor Statistics projected 31% growth in demand for Advanced Practice Nurses nationally from 2014 to 2024. This growth is driven by three factors: 1) a projected wave of nursing retirements, 2) the effects of healthcare legislation, which places an increased emphasis on preventative care, and 3) the effect of an older population living longer and more actively than previous generations. Added to this is a projected change in standards for nurses to qualify for Nurse Practitioner licensure, which is anticipated to move from MS to DNP level by 2025. (AACN Report Appendix F)

These reports suggest that there is a need for this program. Currently, there are no DNP programs in the CSCU system. WCSU would fill this gap.

Standard 3: Organization & Governance

WCSU has a robust and well-defined governance structure rooted in the Faculty Handbook, CSU-AAUP Collective Bargaining Agreement, and the policies of the Connecticut Board of Regents. There is a strong

commitment to shared governance and shared responsibility for the health of the University. New curriculum proposals generally originate at the department level, except in cases where it is a university-wide curriculum decision (General Education, for example), where proposals start at the committee level. If members of administration wish to focus in new curricular areas, faculty buy-in is essential and authorship will remain at the faculty level.

Faculty Handbook

As codified in the faculty handbook, all new degree proposals move through the following steps:

1. Department development and approval.
2. School Planning and Review Committee Approval.
3. Committee on Undergraduate Curriculum and Academic Standards (CUCAS) OR Graduate Council.
4. University Planning and Budgeting Committee (UPBC).
5. University Senate
6. Provost/Vice President for Academic Affairs
7. University President
8. Board of Regents (Academic Council, Academic and Student Affairs Committee, and Board of Regents).

Reporting to the University President, the Provost and Vice President for Academic Affairs is charged with the documentation and approval of all university curriculum. When new programs are proposed, the Provost advises the President on the potential value to the University. The Provost also works with the faculty to develop the materials to be submitted to the BOR, participates in review committees, and presents the material to the BOR with the relevant department representatives.

Board of Regents

As part of the CSU System, there is legislation on the types of degrees offered at the CSUs. Per state statute, the CSUs may only offer education or applied doctoral degrees; traditional research doctorates (Ph.D.) are restricted to UCONN. This new program will be the second doctorate in the Department of Nursing, which also offers an online Ed.D. in Nursing Education in partnership with Southern Connecticut State University. The faculty proposing the program were compensated through curriculum development funds to draft the proposal and develop course outlines. From there the proposal followed all approval processes described above.

When launched, the continued oversight will take place at the department level, with a program director to ensure routine assessments, maintain admissions standards, and manage schedules. In addition, the School of Professional Studies has a dedicated instructional designer to support the development and administration on online courses. The Department of Nursing has developed common templates for course shells to provide consistent experiences to students. The Instructional Designer is available for workshops, support, and troubleshooting as needed.

Standard 4: The Academic Program

The Doctor of Nursing Practice at WCSU will prepare advanced practice registered nursing (APRN) graduates for the highest level of advanced nursing practice. The focus of this program will be to develop practice expertise, within the population foci, to meet standards defined in the American Association of Colleges of Nursing (AACN). The AACN defines the DNP educated nurse as someone prepared to administer and evaluate "any form of nursing intervention that influences health care outcomes for individuals or populations, administration of nursing and health care organizations, and the development and implementation of health policy" (*Essentials of Doctoral Education for Advanced Nursing Practice*, AACN, 2004).

The DNP at WCSU is designed for advanced practice nurses seeking a terminal degree in nursing practice that is not research or education focused. This program will prepare the DNP graduate in both quantitative and qualitative research, evidence-based practice, foundations of policy and practice design, and the implementation of practice initiatives that can advance translational healthcare practices and services to impact significantly the delivery of healthcare within communities. The DNP focuses on understanding research and applying it to practice. Rather than completing a dissertation, DNP students typically complete a project that evaluates a health care program or identifies clinical strategies for improving quality control and patient care.

All degrees in the Department of Nursing are aligned with the Commission on Collegiate Nursing Education (CCNE) standards and guideline. CCNE requires adherence to the following professional nursing standards and guidelines:

- The Essentials of Baccalaureate Education for Professional Nursing Practice [American Association of Colleges of Nursing (AACN), 2008],
- The Essentials of Masters' Education in Nursing (AACN, 2011),
- The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006),
- Criteria for Evaluation of Nurse Practitioner Programs [National Task Force on Quality Nurse Practitioner Education (NTF), 2016].

The Doctor of Nursing Practice (DNP) in clinical preparation prepares advanced practice nurses for leadership positions in health care. The program requires a completion of 40 credits of specialized professional course work that is in line with the AACN's essentials of doctoral education for advanced practice. The courses meet the eight essentials of doctoral education, while enforcing the Advance Practice Nurse Competencies (APN Competencies Appendix G).

Following those guidelines, the DNP graduate will be able to do the following:

- Integrate the foundations of nursing practice into scholarly endeavors, practice, and health care delivery. (Essential I, III)
- Evaluate and employ principles of Evidence Based Practice (EBP) care to meet the needs of current and future patient populations. (Essential II, III)
- Evaluate and implement analytical methods to apprise and develop EBP care to provide safe, timely, ethical, and effective patient centered care. (Essential II, III, IV)
- Analyze health care technology for accuracy, timeliness, feasibility that is financially responsible for health care organizations and population health needs. (Essential III, IV)
- Demonstrate leadership in knowledge and implementation of health care policy, advocacy, and ethical care for global populations. (Essential V)
- Lead inter-professional teams in the analysis of complex patient and health care issues while maintaining cultural competency. (Essential IV, VI)
- Synthesize concepts from various disciplines (epidemiology, biostatistics, environmental) for health promotion and disease prevention for diverse populations. (Essential IV, VI, VII, VIII)
- Design and implement comprehensive approaches and therapeutic interventions for health promotion and disease prevention for diverse and global populations. (Essential IV, V, IV, VII, VIII)

The framework for the DNP clinical practice degree builds upon the domains used in the DNP essentials as well as the National Organization of Nurse Practitioner Faculties (NONPF) and National Association of Clinical Nurse Specialists (CNS) competencies models, the competencies of graduate core, advanced practice and role will be reinforced while adding courses that will address the domains of population focus, specialty focus and aggregate and organization focus.

Degree Requirements

Students will complete a sequence of clinical and course components including approximately 500 hours of clinical practicum experiences to meet the preparatory requirements for a DNP project and the demands of a doctorate in clinical practice. The course requirements for this program include nine DNP core courses and three population- based focus.

This program will be part-time in an online format, with yearly on-site intensives for peer collaboration, participation, and community-building. Part-time studies will require approximately two years to completion of the degree. The table below indicates all courses, credits and clinical hours that are required.

Courses	Credits	Clinical Hours*
NURA: Theory and Concept Analysis	3	
NURB: Health Care Policy and Ethics	3	30
NURC: Qualitative Research	3	
NURD: Quantitative Research	3	
NURE: Quality, Risk Management, and the Use of Biostatistics	3	40
NURF: Analysis of Literature and Evidenced Based Practice	2	
NURG: Epidemiology	3	10
NURH: Leadership in Health Care Organizations	3	30
NURI: Business and Health Care Technology	3	30
Population Focus		
NURJ: Chronic Health Care/Vulnerable Populations	4	100
NURK: Community Health/Population Health	4	100
NURL: Project Seminar	6	160
Total	**40**	**500**

*Clinical Hours: In accordance with the AACN DNP Essentials, students need to have a minimum of 1,000 hours post-baccalaureate supervised clinical practice hours to achieve DNP competencies. Students will complete the number of hours to have a total of 1000 hours, which includes their clinical time completed in their master's program. Post-master's students will be required to submit a letter from their master's degree program that indicates how many hours they have completed in their master's program. The required clinical hours will be met through direct and indirect clinical experiences. Indirect clinical hours are practical experiences that include translation of research into evidence, system leadership, business management, understanding technology, health care policy, and quality and risk management. Faculty who are board certified APRN ANP/CNS with an earned doctorate degree would monitor and evaluate clinical work by doctoral candidates.

The proposed DNP program will primarily use existing nursing faculty at Western Connecticut State University. Almost all faculty within the nursing department currently have doctorate degrees and will be able to teach courses within this discipline. Similar courses are currently taught within the MS in Nursing program and some of the coursework will be shared with the current Ed.D. in nursing program, making

this degree an incremental change, rather than a wholly new degree level. Because the DNP is a terminal degree currently focused towards graduate nursing students within a practice discipline involving nurse practitioners or clinical nurse specialist degree, supervision of clinical practice will require faculty with APRN (ANP/CNS) degree certifications from an accrediting body that are educated at the doctorate level. (Faculty list in Appendix B)

Distance Education
The WCSU Online Policy, (Online Course Policy in Appendix P) approved by the University Senate in May 2013, explicates policies and procedures that help ensure online and hybrid courses at WCSU are of a high quality with respect to course design, delivery, student learning, and support. The Committee on Distance Education is responsible for evaluating and revising this policy. It should be noted that the existing Ed.D. is fully online, which has given us time to develop strong protocols for online instruction.

Program Assessment
The DON's Programs Committee reviews the department of nursing programs as per the evaluation plans on an ongoing basis. Recommendations based on the assessment are brought to the full DON faculty for review and vote. Faculty utilize end of semester meetings to review courses taught during that semester to ascertain that they meet the mission, goals, and student learning outcomes identified by the DON.

Input is provided by professional nursing constituents. The Chair of the DON holds membership in the Connecticut League for Nursing's Council of Deans and Directors, which meets a minimum of four times during the academic year. In addition, the Chair attends biannual meetings of the Connecticut League for Nursing's Council of Deans and Directors and the Connecticut Hospital Association Meeting Group of Patient Care Executives. Informal discussions take place with current students and faculty as well as prospective students, clinical affiliates, and community leaders, which occur both at the university and at different healthcare sites.

There is communication with nursing representatives from clinical agencies responsible for clinical placements. An Advisory Committee for the DON was formed five years ago with meetings held annually. Agency personnel and faculty are invited, and issues of concern are discussed at this meeting. Input from these meetings is shared with the DON faculty and utilized to make changes, as deemed necessary. Alumni surveys are sent to graduates of the baccalaureate and master's program within one year of graduation.

When students complete the DNP, they will be asked to respond to graduate exit surveys. Alumni surveys will be sent to new DNP graduates 1 and 3 years after graduation. The DNP committee will evaluate results from these surveys and, where appropriate, program adjustments changes will be made. These changes will then be brought to the programs committee and the faculty of the department of nursing for review. Once approved by the programs committee and the nursing department faculty, they will be presented to graduate counsel for review and approval.

Course Outlines
The DNP curriculum was developed using the National Organization of Nurse Practitioner Faculties (NONPF) Nurse Practitioner Core Competencies Curriculum Content (NONPF, 2014), the National Association of Clinical Nurse Specialists Core competencies (NACNS) (NACNS, 2010), and the Essentials for Doctoral Education for Advanced Nursing practice (AACN, 2006). Program and course objectives are aligned with these standards. Students will be required to start and maintain a DNP portfolio as a method to evaluate when all the program outcomes and competencies have been met. (Course Outlines are in Appendix H).

All programs at WCSU are evaluated at least every seven years, per BOR policy. Nursing is evaluated more frequently to stay current with CCNE requirements.

Evaluation of student learning is described in Standard 8.

Standard 5: Students

The American Association of Colleges of Nursing (AACN), along with affiliated member schools voted in October 2004 to endorse the position statement on the practice doctorate in nursing as the entry-level education for advanced practice nurses. This signaled a change within nursing education to transition programs of nursing study from a master's level in advanced practice nursing to a doctorate level preparation by the year 2015. In response to the AACN's position statement, nursing schools across the United States started to plan and develop DNP programs at the graduate level, with an evolution offering both entry-level DNP programs and post-masters DNP programs. Since the position statement in 2004, programs have been developed within the United States and are operating in 50 states, including the District of Columbia as of 2017. Western Connecticut State University will expand on their existing MS Advanced Practice Nurse Practitioner Degree program, to provide our graduates with an opportunity to earn the highest credential in their field.

DNP Enrollment

The WCSU DNP program will include advanced practice registered nurses (APRN) who have completed their studies within a practice domain and wish to obtain a practice doctorate specific to their field of study. This may include population foci in adult/gerontology, family, acute, and psychiatric nursing practice. Entry into the program will include both APRN's who have just recently graduated from study and those who have been in practice for many years. The DNP program will be offered in an online format so that we may meet the needs of working APRNs. Coursework taken at other colleges will be evaluated by the course coordinator on a case-by-case basis, with a maximum transferrable credit set at six (6). Program enrollment will be a cohort-based model starting every fall. There will be a minimum of 12 students per cohort.

Admission Requirements

Applications for admission to the DNP program are submitted to the Office of Graduate Admissions and must include official transcripts of all undergraduate and graduate work and an application fee. Admission to the DNP program is selective. Candidates must have earned a MS in nursing from an accredited program, hold a current RN and APRN license. At the time of application, candidates must provide a resume, one professional letter of recommendation, and an essay. All applications must be received by March 1. The DNP subcommittee will make admission decisions.

Because of the nature of the clinical experiences and regulations of various clinical agencies utilized in the nursing program, all nursing students are required to adhere to departmental policies in addition to the immunizations required of all university students. This includes:

- CPR certification,
- Background check,
- Immunization status (MMR, varicella, Hepatitis B, PPD), and
- Malpractice Insurance.

In addition, students must meet any additional requirements identified by a clinical-affiliating agency, including a criminal background check. Clinical agencies reserve the right to refuse clinical placement to students who do not pass the background check.

All students must be certified in cardiopulmonary resuscitation (CPR) as a health-care provider prior to entering clinical course and must maintain current certification to be eligible to attend clinical experience. In addition, students are required to carry an advanced practice student malpractice insurance policy while in clinical courses.

These requirements will be posted on the admissions pages, upon NECHE approval of this degree. To see an example, please look at the Ed.D. Nursing Education page here https://catalogs.wcsu.edu/grad1920/sps/programs/doctor-of-education-in-nursing-education/

Evaluation and Student Success

As stated in the NECHE 5-year report, graduate level retention rates are in the 70-80% range overall, with a 90% retention rate for the Ed.D. programs (Education and Nursing). Last year's undergraduate retention rate for the University as 74%, and 88% for the BS in Nursing. WCSU has invested in increased tutoring resources, a First Year Navigation course, and most recently an academic coaching program, since our last decennial review, which is having a positive impact on retention overall. At the graduate level, the close relationship with faculty advisors, and the clear communication of course requirements and offerings make our retention rates strong. We continue to strive for improvements at every level, but our experience with the Ed.D. in Nursing (a fully online program), has laid the groundwork for a positive student experience in the DNP.

Monitoring of Student Progress

Each student will be evaluated according to the course requirements as established by faculty. Didactic courses will use a combination of evaluation measures: written exams, term papers, and class presentations, self- and group evaluation. Practicum courses will be evaluated by direct clinical observation, oversight supervision, logs, clinical projects and papers and evaluations (faculty, student, preceptor, self).

Both the preceptors and the faculty will complete clinical evaluations. The preceptors will use a student evaluation tool at both the midterm and the end-of-semester for evaluation of the student. Preceptors will also provide the students with their feedback. The faculty completes all grading of clinical work. Remediation plans are to be utilized by the faculty in conjunction with the preceptor. The student will complete evaluations of the preceptor and clinical site at the end of the semester and faculty will complete an overall clinical site evaluation at the end of each semester. Faculty members will have contact with the preceptors throughout the semester and if possible, faculty will make onsite visits of clinical sites.

Grade Requirements and Consequences for Failure to Make Progress

Students can complete the post-master's DNP degree on a part-time basis within two to three years. All students are required to complete the degree within seven years

Successful progression towards the completion of the DNP is determined by student performance in courses for which they are registered. Graduate students in nursing must meet the standards for academic standing set forth in the graduate catalog of Western Connecticut State University. To be eligible for an advanced degree, a student's cumulative grade point average must be at least a 3.0.

Graduate nursing students must maintain a B average to graduate from the program. Should a student earn a grade below a B- in a course, that course must be repeated, and the student must achieve a grade of B- or above to progress in the program.

Any graduate student whose cumulative graduate grade point average falls below 3.0 or B is automatically placed on academic probation. If, at the end of the following semester of enrollment, the student's cumulative grade point average increases but remains below 3.0, the student may be continued on academic probation for a maximum of one additional semester. At the end of that semester, the student must have a 3.0 cumulative grade point average or be dismissed from the division by the academic dean for unsatisfactory academic performance. Semesters include fall, intersession, spring, and summer.

All students are expected to maintain continuous registration. Failure to maintain registration and sustain active student status will result in a leave of absence. Students seeking a leave of absence from the program must write a letter to the DNP program committee, who will forward the letter to the Office of Graduate Study. Students on a leave of absence should keep in mind the need to maintain their status and time frame for completion of degree. Students who wish to resign from the University may do so by submitting a letter to the Office of Graduate studies and the Department of Nursing.

DNP Student Advisement and Academic Support

Because the DNP program is a doctoral program, student advisement will be performed by the graduate nursing program coordinator. For the clinical portion of the program, the students will be assigned a clinical advisor to mentor and guide the student to be successful in the program. Program sheets outline degree requirements for all academic majors and are readily available online for students to review at http://www.wcsu.edu/academics/programsheets/.

As of spring 2020, all tutoring support services and library services can be accessed online. While doctoral students do not usually make use of these, they are available where appropriate. In addition, professional librarians are available to assist students and faculty in finding and obtaining appropriate research materials for any topic or project. Research consultations provide an opportunity for one-on-one time with a subject specialist to start or complete the research. The librarian provides guidance throughout the processes and assists with choosing the right databases, search terms, materials, and more.

Technological Support

Information Technology Services: Information Technology & Innovation (IT&I) supports six staffed computer labs, three 24-hour computer labs, and technology classrooms on both of Western's campuses and online support for use of Blackboard and specialized software programs as needed. All Western students are eligible for the following accounts:

> Western Windows Account – Students who wish to use any of the computer facilities at Western (Computer Centers, technology classrooms, 24-Hour Labs, etc.) or access the wireless network must obtain a Western Windows account. Registered students can receive a Windows account at any staffed computer center. A university ID card is required.

> Connect 365 Account: The Connecticut State Colleges and Universities System (Western, Eastern, Southern and Central) email policy states that university email will be considered an official means for communication. All students are issued a university email for university business through Microsoft's Office 365 suite of online services. In addition to email, Connect365 gives you access to online storage, collaboration tools and Office Web Apps.

> WestConn Mobil: Western has a mobile website for quick, on-the-go access to important information and services including news, announcements, email, weather, phone numbers and more. Western Mobile is accessible anytime, anywhere.

> WestConnduit: WestConnduit is Western's campus portal. It brings together campus announcements, upcoming events, social media, and access to essential resources like Blackboard Learn (course management system) and Banner Web (see your grades, course schedules, financial aid information, register for classes and make payments).

> E-Learning at Western: Blackboard Learn is a course-management system that enables efficient delivery of online education. Students may access their Blackboard courses through WestConnduit by clicking on the "Student Tools" tab and then "Log in to Blackboard" in the "My Courses" widget

Other Services for All Students

Financial Aid: Western Connecticut State University offers financial aid to help qualified students meet their educational expenses. The staff of Financial Aid and Student Employment is available to assist students in determining their eligibility for the various sources of aid available. Staff are available online and by telephone. Financial aid for nursing students is available at the following Western Connecticut State University web link: http://www.wcsu.edu/finaid/

AccessAbility Services: The Office of AccessAbility Services provides accommodations and support services to students with documented disabilities to provide reasonable accommodations, advocacy,

academic coaching, assistive technology, writing assistance, and support for foreign language and math alternatives (where appropriate).

Career Success: The Career Success Center, formerly Career Services, was reimagined in 2017 and relocated to attract students, alumni, employers, faculty, staff, and parents, delivering on a strategy of the Strategic Plan to "support career development from admission to post-graduate placements." Their services are easily accessed online.

Student Nursing Association: Currently at WCSU there is an active student nursing association (SNA) comprised of undergraduate students with an elected student president. Once the DNP program is established a representative student member will be selected by volunteering to serve on the DNP program committee which will be formed and include (3) faculty members teaching in the DNP program and the DNP coordinator.

Nursing Alumni Society: There is an active Nursing Alumni Society at WCSU. The purpose of the Nursing Alumni Society is as a nonprofit organization dedicated to promoting the welfare, interest and excellence of Western Connecticut State University with goals to maintain the excellence of nursing at the university and helping our programs to advance leadership in nursing education.

Student Rights and Responsibilities

WCSU aligns its policies with the Connecticut State Colleges and Universities Code of Conduct, which states

Connecticut State Colleges and Universities (CSCU) has certain self-defined institutional values. Principal among these values is respect for the safety, dignity, rights, and individuality of each member of the CSCU Community. The opportunity to live, study, and work in an institution, which values diverse intellectual and cultural perspectives and encourages discussion and debate about competing ideas in an atmosphere of civility, is a basic component of quality higher education. All members of CSCU must at all times govern their social and academic interactions with tolerance and mutual respect so that the students who pass through a CSCU door are enriched by these experiences and are prepared for full and enlightened participation in a multi-cultural society.

https://www.ct.edu/files/policies/2.1%20StudentCodeofConduct.pdf

The WCSU student code of conduct, which includes student ethical behavior is in the student handbook at:

https://www.wcsu.edu/judicial-affairs/wp-content/uploads/sites/173/2018/01/StudentCodeofConduct16.pdf

DNP Program Student Responsibilities

Students are responsible to assure that their correct name, home address, e-mail contact, phone, (home/work/cell) are on file with the nursing and graduate office. Students are responsible to update their personal information Banner, the WCSU online system information. Students enrolled in the DNP program must comply with the mandatory clinical requirements required by both the school of nursing and chosen clinical site. Students are required to provide their own transportation to clinical or research sites. Students will have access to school email, course information, access to *Blackboard Learn* and the WCSU library services along with assistance if needed by the IT department. In addition to the above requirements the DNP student is responsible to:

- Be self-directed in identifying initial and ongoing learning needs
- Seek learning opportunities to meet identified needs, and to be accountable for their performance in their selected role.
- Discuss specific clinical objectives and negotiate a mutually agreeable schedule with the preceptor prior to the actual preceptorship.

- Mutually negotiate Clinical/Practicum Learning Contract with Preceptor and Faculty.
- Provide the clinical site with the necessary licensure, educational, and/or immunization information as requested.
- Complete orientation and forms as required by the clinical agency.
- Demonstrate professional behaviors at all times and be accountable for completing assigned responsibilities in a timely manner.
- Maintain a log of experiences attended throughout the duration of the clinical experiences in the program and provide a clinical log in Typhon.
- Demonstrate progressive independence and competency in the chosen role and specialty area.
- Actively seek input into the evaluation process and participate in self-evaluation of strengths and identified areas for professional growth with Faculty member and preceptor(s).
- Complete clinical preceptor and site evaluations and provide feedback to the preceptor and faculty.
- Maintain personal records of all evaluation forms.

Student Complaint Procedures

The DON program defines what constitutes a formal complaint and maintains a record of formal complaints received. The program's definition of formal complaints includes, at a minimum, student complaints. The program's definition of formal complaints and the procedures for filing a complaint are communicated to relevant constituencies.

Faculty and student roles pertaining to governance are clearly defined in a variety of sources that include the WCSU website, Student Handbook, Faculty Handbook, and Collective Bargaining Agreement. Meaningful participation in governance is encouraged and facilitated through University Senate Committees, which have both faculty and students in their membership, and the Student Government Association.

These are listed under:

- Academic Services and procedures (http://www.wcsu.edu/catalogs/undergraduate/academicservices-procedures/), (http://www.wcsu.edu/studenthandbook/universitypolicies-and-where-to-find-them/),
- Undergraduate catalog (http://wcsu.edu/catalogs/undergraduate/),
- Graduate catalog (http://wcsu.edu/catalogs/graduate/),
- Student Handbook (http://www.wcsu.edu/studenthandbook/)
- Faculty Handbook (http://www.wcsu.edu/facultystaff/handbook/).

The following are sources of information pertaining to the nursing program, which are updated annually:

- WCSU website: http://wcsu.edu/
- Department of Nursing Website: https://www.wcsu.edu/nursing
- WCSU undergraduate catalog: http://www.wcsu.edu/catalogs/undergraduate/sps/programs/nursing/#bs_nursing
- WCSU graduate catalogue: http://www.wcsu.edu/catalogs/graduate/sps/programs/master-of-science-in-nursing/

Student concerns with the program, grading, and/or other concerns are given voice primarily by the chain of command. In most instances, concerns are related to the course(s) in which students are enrolled. Students are encouraged to problem solve using the chain of command available within the DON– faculty, program coordinator, and chair. Should the concern not be resolved within the DON, students may go outside the DON to the appropriate Dean. Feedback about the program is also garnered through formal and informal meetings with students and course evaluations. Concerns are then brought to the appropriate DON committee for review and recommendations, which are then brought to the full

faculty for consideration. For issues specifically related to grading that are not resolved using mechanisms available within the DON, the Palpable Injustice in Grading procedure may be followed.

Protocol for Grievance Procedure

Students who think they have been graded inappropriately may file a grievance in accordance with the Western Connecticut State University, Office of Graduate studies found at http://www.wcsu.edu/catalogs/graduate/academic-policies/

Standard 6: Teaching Learning Scholarship

The DON currently has twenty full-time faculty who are on tenured or tenure-track appointments and are academically and experientially prepared for the areas in which they teach. Appendix B shows faculty qualifications and teaching responsibilities. All nursing faculty hold current registered nursing licenses in the state of CT. Nursing faculty who teach clinical courses in the master's program and supervise the clinical experiences of these students also hold an advanced practice nursing license in the state of CT. The lead faculty for the NP track, Mary Nielson, holds a DNP, is certified as an Adult Nurse Practitioner, and engages in clinical practice. Non-clinical faculty who teach in the master's program are experts in their area.

Faculty at WCSU, and the DON specifically, are hired to teach across multiple programs (undergraduate and graduate levels as appropriate). This allows for balanced teaching loads and facilitates flexibility as enrollments in each degree shift. In the case of the DNP, faculty are shifting out of a shrinking RN-to-BSN program to support other nursing programs. In addition, WCSU has offered an Ed.D. in Nursing Education for several years (in partnership with Southern Connecticut State University). As part of the development of that program, research expectations for faculty doctoral faculty were clearly delineated. These can be found in the Department Bylaws (Appendix I). These practices have prepared us to take on this new degree with very little change in our operations.

Faculty Recruitment
The University's search procedures are interpreted from the Affirmative Action Plans by State Government Agencies Regulations Sections 46a-68-75 through 46a-68-114, inclusive. These procedures are designed to ensure an efficient search process and to provide clear documentation of efforts to support our Affirmative Action Policy.

The terms and conditions of every appointment to a full-time position within the University are contained in the letter of appointment, which follow the format in Appendix A of the CSU-AAUP CBA. A copy of the letter of appointment is supplied to the member for signature of acceptance and consent, a copy placed in the member's personnel file (see Article 4.14), and a copy sent to the member's department. Any subsequent extensions or modifications of such appointment, other than with respect to changes in the Collective Bargaining Agreement as negotiated between the parties to this Agreement, agreed upon between the member and Administration after consultation with the department, and any special understanding between the University and the member shall be stated or confirmed in writing, and a copy shall be supplied to the member, a copy placed in the member's personnel file and a copy provided to the member's department.

Salaries and benefits are set at levels that ensure the institution's continued ability to attract and retain appropriately qualified faculty and academic staff whose profiles are consistent with the institution's mission and purposes. Salaries are set in relation to the AAUP-CBA and are laid out in terms of advanced degrees earned and years of relevant experience.

Table 1 shows the current WCSU average DON faculty salaries based upon rank and are compared to salaries reported for all faculty in comparable public universities, Category IIA (Master's) for 2017-2018.

Rank	DON Average Salaries	Public Salary*
Professor	108,076	94, 201
Associate Professor	81,723	76, 428
Assistant Professor	74,441	66,532

*American Association of University Professors. (2018). The annual report on the economic status of the profession, 2017-18. Academe, March-April, 104(2), 18

The full-time equivalency (FTE) of faculty involved in each program follows the CCNE formula for calculating FTEs. The overall faculty (whether full-time or part-time) is sufficient in number and qualifications to achieve the mission, goals, and expected program outcomes. Faculty-to-student ratios ensure adequate supervision and evaluation and meet or exceed the requirements of regulatory agencies and professional nursing standards and guidelines. In addition, AAUP-CBA has an upper limit of 21% part-time faculty. This keeps our reliance on adjuncts well below regional standards.

The AAUP-CBA is the primary document for the description of faculty duties and expectations. Details include criteria for promotion and tenure as they pertain to teaching, scholarship, service, and professional engagement. (CBA 4.11.91-4.11.9.5 in appendix). In addition, the faculty handbook (https://www.wcsu.edu/facultystaff/handbook/), developed by the University Senate and maintained by the office of the Provost, includes local details about the evaluation process and the rights of the faculty member. Finally, each department maintains bylaws about discipline-specific expectations.

The DON's bylaws inform faculty for the purpose of governing the DON and all academic professional matters impacting the DON (students, faculty, and curriculum). The DON governance is handled through a system of committees, of which there are eight: Department Evaluation Committee (DEC) (membership requires faculty to be tenured), Ed.D. Faculty Affairs, Master's, Learning Resources, Programs, Student, and Sunshine. Faculty also serve on the University Senate, sit on the board of WCSU's Kappa Alpha chapter of STTI, and serve as advisors to the Student Nursing Association, which while not specifically DON committees, count as service to the DON.

Support for Scholarship and Professional Development
The AAUP-CSU CBA identifies the following areas for support of continuous learning among university faculty.

Conference and Workshop Funds
Each full- and part-time faculty at WCSU is eligible to receive Conference and Workshop Funds for attendance at professional seminars, workshops, conferences, or educational exchanges (CBA 9.5.1). The President or his designee shall consult with the cabinet and the Senate President in assigning the travel funds. Each full-time member shall normally not be allowed more than $1,500 reimbursement per contract year toward the cost of fees, travel, food and lodging related to attendance at such events, provided such travel is approved in advance; for part-time members this amount shall be no more than $750, however, at the discretion of the Dean of the School of Professional Studies additional funding may be awarded through the Dean's Fund.

Faculty Development Funds
Each faculty is eligible for Faculty Development Funds for activities by and for members that enhance their ability to be productive and innovative professionals (CBA 9.6). At WCSU the Faculty Development and Recognition Committee advises the Chief Academic Officer concerning the distribution of these funds. A maximum of $1200 may be granted to any individual full-time faculty member and $600 to any individual part-time faculty member. The Committee believes that funds should be available to many individuals, so prior use of the Fund as well as merit of activity will be considered.

University Research Grants

As stipulated in 9.10 and 12.10.1 of the CBA funding is made available each year to provide grants of up to $5,000 to support research projects conducted by full-time CSU faculty members. Joint projects or collaborations are eligible for up to $5,000 per CSU faculty member. Eligible faculty members must apply for a grant in compliance with the CBA and the application guidelines.

Curriculum Related Activities

Curriculum related activities (CBA 9.11) are supported by funds distributed among the universities on a prorated basis for curriculum-related activities performed by full-time members during the summer or intersession. Such funds shall be expended at the discretion of the President or designee following an advisory system established by the Academic Vice President.

Retraining Funds

Retraining funds (CBA 9.12) may be allotted for purposes of retraining of members. Such funds shall be used to defray tuition, book, travel, and related expenses incurred by a member in pursuing a retraining program approved by the President and CSU-AAUP. Currently the Academic Leave Committee has the responsibility to review the applications and make recommendations to the President.

Reassigned Time for Research

WCSU must award at least 43 credits of reassigned for research time per semester (CBA 10.6.4). Faculty may apply for up to six (6) load credits of reassigned time for research per semester. In addition, funds are set aside for Instructional Enhancement (CBA 10.6.5), which often ties into faculty research. WCSU is obligated to award 87 credits per semester. Awarding of reassigned time is vetted by faculty committees, deans, and the Provost/Vice President for Academic Affairs.

Academic Freedom

All members of the bargaining unit are entitled to full freedom in research and in the publication of the results, subject to the adequate performance of their other academic duties. This is clearly codified on the CSU-AAUP Collective Bargaining Agreement.

Quality of Teaching and Learning

The faculty of the nursing program is solely responsible for the development, implementation, evaluation, and revision of the curriculum, and any revision is conducted with faculty acting as a committee of the whole ensuring active participation in decision-making. End-of-semester meetings of the entire faculty are also a place where the curriculum is reviewed and discussions regarding revisions occur. The DON recently conducted curricular mapping of all courses, undergraduate and graduate, with input and follow-up from faculty validating the information was complete and accurate. The programs are evaluated annually using the baccalaureate and master's program evaluation plans.

The DON maps course content to widely accepted standards in Nursing, ensuring strong pass rates on certification exams. (Graduating class of 2017 had a pass rate of 93%, graduating class numbers for 2018 are pending). In addition, there is a sustained focus on innovative teaching techniques, such as training in our campus-based SIM Labs, prior to clinical placements, and supplementary to those field experience. Faculty are actively involved in testing and evaluating SIM Lab scenarios for their effectiveness and have presented and published research on this topic. Most recently, Dr. Linda Warren collaborated with colleagues elsewhere to produce "A Systematic Review of the Effectiveness of Simulation-Based Education on Satisfaction and Learning Outcomes in Nurse Practitioner Programs" (2016, Warren, J.N., Luctkar-Glude, M., Godfrey, C., Lukewich, J.).

Since this degree will be offered fully online, it is also important to note that there is a full-time instructional designer dedicated to supporting the School of Professional Studies. She works one-on-one with faculty, as well as providing group support sessions and implementing online teaching

evaluations for these courses. Finally, the university supports regular workshops focused on new online tools, as well as good pedagogical practices. The DON faculty have all had experience with online and hybrid courses and have a regular practice of examining pedagogies and learning outcomes.

Academic Advising

To ensure that academic advisement practices and procedures are consistent with the mission of Western Connecticut State University and the collective bargaining agreements of CSU-AAUP, the DON has a department level committee responsible for reviewing practices and supporting changes where necessary. The responsibilities of the committee are:

- To facilitate communication and coordination among teaching faculty, departmental chairs, Deans, the Academic Advisement Center, and students in the development and operation of WCSU's shared system of academic advisement.
- To promote the implementation of best practices of developmental advisement.
- To create and administer an Academic Advisement Certificate program to provide continuing education on advisement practices and procedures.
- To conduct triennial reviews of advisement effectiveness and practices in the University and to report these findings to the University Senate and the Provost.
- To recommend policy or procedural changes to the University Senate and Provost to enhance the effectiveness of academic advisement.

Per the CSU-AAUP CBA, advising the responsibility for full-time faculty. This is true for both undergraduate and graduate degrees. For online degrees that advising is available via phone, email, and web conferencing tools.

Standard 7: Institutional Resources

In developing the proposal for the DNP, Western Connecticut State University developed a three-year budget plan that includes the cost of staffing, technology, and marketing of the new program. A copy of that budget is in Appendix J. It addresses the areas below.

Technology

The technological infrastructure of the University is sound. As part of the CSCU system, we participate in the joint purchasing agreement of Blackboard Learn, which helps to subsidize and/or reduce the cost of access to this technology. Blackboard Learn also provides support for learners within this contract, having online help desks 24 hours per day. At WCSU we have an Information Technology & Innovation Department that divides its operations into support of general technology infrastructure and academic technology support. They provide a robust suite of tutorials, an online help desk, and regular training sessions for faculty. Adding the DNP program represents no additional cost in this area. It does suggest a greater return on investment, with more students and faculty using these tools.

Library Resources

The library resources available are also already in place. They have been developed to support the MS in Nursing and the Ed.D. in Nursing Education. There is a library faculty member responsible for supporting these resources and making sure that materials are current and available. The WCSU library has largely gone to online resources, with a balance of subscription services and on-demand ordering for those resources not in the collection. This allows them to be responsive to emerging needs, without having journals that are never used gathering digital dust. We anticipate no new costs in this area.

Marketing

The budget does reflect a modest investment in marketing the new program. This will be seed money for ads in professional nursing publications. We do not plan for a large campaign given the number of students already in our MS Advance Practice Program who will likely return for the DNP.

Curriculum Development and Staffing

The cost of developing the program has already been supported with Summer Curriculum Grants, which are part of our regular funding cycles. As courses need revision, these funds can be tapped to support emerging trends or changes resulting from our assessment practices.

There will be an increased cost in staffing to support the delivery of this curriculum, however, we anticipate that impact will easily be offset by the tuition received. Part of the reason is that we have seen a drop in enrollment of our RN to BSN has been increased competition from online programs, and due to the preference for four-year degrees in general. With that drop, we have been shifting our staffing to these graduate areas. Nevertheless, if successful, we will need a new faculty line in another year. This is factored into our budget. Administrative costs are already covered by the reassigned time offered to the director of the graduate nursing programs.

Standard 8: Educational Effectiveness

The DNP curriculum was developed using the National Organization of Nurse Practitioner Faculties (NONPF) Nurse Practitioner Core Competencies Curriculum Content (NONPF, 2014), the National Association of Clinical Nurse Specialists Core competencies(NACNS)(NACNS, 2010), and the Essentials for Doctoral Education for Advanced Nursing practice(AACN, 2006). Program and course objectives are aligned with these documents.

Program Learning Outcomes

The DNP graduate will be able to do the following:

- Integrate the foundations of nursing practice into scholarly endeavors, practice, and health care delivery.
- Evaluate and employ principles of Evidence Based Practice (EBP) care to meet the needs of current and future patient populations
- Evaluate and implement analytical methods to apprise and develop EBP care to provide safe, timely, ethical, and effective patient centered care.
- Analyze health care technology for accuracy, timeliness, feasibility that is financially responsible for health care organizations and population health needs.
- Demonstrate leadership in knowledge and implementation of health care policy, advocacy, and ethical care for global populations.
- Lead inter-professional teams in the analysis of complex patient and health care issues while maintaining cultural competency.
- Synthesize concepts from various disciplines (epidemiology, biostatistics, environmental) for health promotion and disease prevention for diverse populations.
- Design and implement comprehensive approaches and therapeutic interventions for health promotion and disease prevention for diverse and global populations.

Assessment of Learning Outcomes

The DON has developed a comprehensive assessment plan for this program. It includes portfolio review, culminating project review, and evaluation of clinical competencies. The full plan can be found in Appendix K.

Students will be required to start and maintain a DNP portfolio as a method to evaluate when all the program outcomes and competencies have been met. Portfolio guidelines and evaluation are in Appendix L.

Evaluations documents for the DNP project are included in Appendix M. The student will progress through the initial stages of appraisal of the literature and development of implementation and methodology. The student will then do a DNP project defense for the DNP committee. Students will then obtain the necessary IRB approval. Student will complete their research with a faculty and site mentor. After data collection students will complete their projects with results, conclusions and suggestions for future practice and studies. Students will then complete a final DNP project defense.

Clinical evaluations will be completed by both the preceptors and the faculty.   A student evaluation tool will be used by the preceptors at both the midterm and the end-of-semester for evaluation of the student (Appendix N). Preceptors will also provide the students with their feedback. All grading of clinical is completed by the faculty. Remediation plans are to be utilized by the faculty in conjunction with the preceptor.   Student evaluation forms of the preceptor and clinical site will be completed by the student at the end of the semester and faculty will complete an overall clinical site evaluation of each clinical site at the end of each semester. Faculty members will have contact with the preceptors throughout the semester and if possible onsite visits of clinical sites will be made by faculty.

The DNP Project proposal will start to take shape during the first semester of course work. Throughout the program, students will progress with their DNP projects while receiving guidance from course faculty with regards to proposal development including oral presentations. Students will be required to submit a DNP Project Team Appointment or Change form when they have decided on DNP team members. Students should refer to the DNP final evaluation guidelines to be used by all DNP faculty during the proposal and final presentation session. Students are encouraged to align their proposals with the Standards for Quality Improved Reporting Excellence Guidelines (SQUIRE).

Post-Graduate Assessments
Program evaluation include graduate exit surveys (Appendix O). Alumni surveys will be sent to new DNP graduates 1 and 3 years after graduation. Results from these surveys will be evaluated by the DNP committee and appropriate program and course changes will be made. These changes will then be brought to the programs committee and the faculty of the department of nursing for review. Once approved by the programs committee and the nursing department faculty, they will be presented to graduate counsel for review and approval.

Data from all evaluations of students are then reviewed by the DON assessment committee to assess patterns of strength and weakness in student performance. Curriculum will be updated to address and persistent weaknesses.

The DON is accredited by CCNE and intends to submit this program for review. This external evaluation will help to ensure the highest quality curriculum and assessments.

Standard 9: Integrity, Transparency and Disclosure

WCSU is committed to transparency regarding its enrollments, programs, and outcomes. Most information about the institution can be found in the about section of our website one these two pages in particular https://www.wcsu.edu/academics/consumer/ and https://www.wcsu.edu/president/facts-figures/.

General information pertaining to the nursing program, which is updated annually, can be found at:

- WCSU website: http://wcsu.edu/
- Department of Nursing Website: https://www.wcsu.edu/nursing
- WCSU graduate catalogue:
  http://www.wcsu.edu/catalogs/graduate/sps/programs/master-of-science-in-nursing/

This new program and its policies have passed through university governance. This program will be presented on the Department of Nursing's website, the WCSU graduate catalog and in printed material prepared for the purpose of advertising and providing information to the public. This DNP will also be presented to the Nursing Department's Accreditation body for accreditation purposes. Admission policy/procedures and program retention will be discussed and available to students in written materials as stated above.

The graduate catalog and student handbook provide students with procedures in the case of a grievance. Students are also made aware by website and graduate catalog of the University structure and names of administrative officials to contact.

General information pertaining to the nursing program, which is updated annually, can be found at:

- WCSU website: http://wcsu.edu/
- Department of Nursing Website: https://www.wcsu.edu/nursing
- WCSU graduate catalogue:
- http://www.wcsu.edu/catalogs/graduate/sps/programs/master-of-science-in-nursing/

In addition, the Department of Nursing tracks student success rates on NCLEX exams and, to the extent possible, employment placements for both the undergraduate and graduates.

Future Plans

WCSU has been focused on two important efforts to help us maintain and grow our enrollments. The first is to focus on developing graduate programs that meet regional needs. In the past four years we have revised and modernized our offerings in the education program to meet emerging needs.   In the process, we have found a greater demand for support for English Language Learners, special education, and most recently, instructional technology. We added an MS in Addiction Studies to prepare out graduates to serve in the many areas that are helping move people and families to recovery. Our Master of Health Administration has also been updated and we are seeing increasing growth in that program. Last fall we also added a MS in Integrative Biological Diversity (in partnership with Southern Connecticut State University), which is already attracting the attention of the water-use and land-use organizations throughout the state.

In the process of developing these graduate programs, we have found that our second strategy will be to move most of these to online/low residency models.   Our adult learners need that flexibility, and our experience in several programs has laid the groundwork for this effort.   Our MFA in Creative and Professional Writing has operated as a low-residency program for over 10 years and our Ed.D. in Nursing has been fully online for almost as long. Our students in graduate level education programs are pushing us in this direction and the recent pandemic has nudged that forward. This DNP will follow that trend, and we will plan for all the programs listed above to have significant online components going forward.

Our infrastructure for online learning is strong in terms of technology, instructional design support, and student processes. We will move forward with a substantive change application in this category in the next two months.

In sum, we are excited about this trajectory for WCSU, because our strength has always been offering professional programs that are grounded in the liberal arts. At the graduate level, we have been preparing professionals from the start, and serving them well with responsive curriculum and new modalities will make them even stronger. Indeed, as we fight for stability in our undergraduate enrollments our bright spot has been graduate education, which has been increasing by about 40 students per year for the last four years. Even the fall 2020 class is showing signs of growth. We believe this means we are on the right track for a bright future.

Appendix A: Program Review Policy
Academic Program Review Process

I. Purpose and Rationale

As mandated by the BOR, all WCSU undergraduate and graduate degree programs approved by the Connecticut Board of Regents for Higher Education and all BOR approved Centers will undergo review every seven years*. Scheduled program reviews are an integral part of the University's strategic planning process. They support ongoing efforts to demonstrate institutional effectiveness and maintain accreditation by the New England Commission on Higher Education (NECHE). The program review is intended to be a rigorous, collegial, and supportive process. It is a peer review process including Department faculty, external evaluators, deans, appropriate governance bodies, and the provost.
*For programs with specialized accreditation, the most recent self-study or mid-cycle report may be submitted as the program self-study and action plan. However, care must be taken to align that report with the criteria described hereafter. A summary of that alignment should be included in the Program Review Materials.

II. Contents of Program Review Self Study

A. Purposes (Mission, Goals, Objectives, Vision): The Departmental Program Review Committee (DPRC) should examine and when necessary suggest revisions of the program's mission, goals, and/or objectives to ensure congruence with the University's mission and Strategic Plan. Documents to be consulted include: The University Mission, Vision, Values, and Strategic Plan, the Program Mission and Vision, Program Mission and Strategic Plan (where applicable), Program Annual Reports, Accreditation Standards (NEASC or discipline specific).

B. Evaluation of Curriculum: The DPRC should evaluate the curriculum from internal and external perspectives.

C. Internal perspectives should focus on the organization of curriculum, the relevance and communication of the program learning outcomes. To do this the DPRC should review:

1. The organization of the curriculum to ensure that courses are clearly aligned with the program learning outcomes. Evidence for this alignment will be found in course outlines and syllabi, which should include relevant program learning outcomes.

2. The sequencing of requirements and course pre-requisites to ensure that they are logical and support student success.

3. A review of any requirements outside of the major (cognates) and a description of their relevance to success in the major. Examples of such relevance may include syllabi from the major that build on the knowledge from the cognate, e.g., nursing syllabi assume knowledge of anatomy and physiology, meteorology syllabi assume knowledge of calculus.

D. External perspectives may include comparisons with peer programs at other universities, comparisons with national or international standards or guidelines, advisory committee reports, and specialized accreditation standards where applicable.

E. Assessment of Student Learning Outcomes: The DPRC should review direct and indirect assessments of the program learning outcomes as part of the evaluation of the program's effectiveness.

1. For direct assessment, the DPRC should examine the full program assessment plan and results of the last five years to see that the plans are appropriate to the kinds of evaluation needed and that the results are used to improve curriculum. Materials to be consulted are a complete assessment plan and description of the protocol, assessment results for the last five years, records of any changes to curriculum or pedagogy that resulted from the review of assessment results. All of the above should be documented on the <u>NEASC E Series</u> (now NECHE) forms as a summary.

2. For indirect assessment, the DPRC should examine any documents that reflect external assessments of the program or student success after graduation. Materials to be consulted may include: employment rates (overall and/or in field) one or more years after graduation, rates of graduate/professional school applications and acceptances, surveys of supervisors of student teachers and/or interns/co-op/practicum students, surveys of recent graduates and/or other alumni, assessments of co-curricular activities relevant to the program, and descriptions of any changes made based on this data.

F. Student Enrollment, Retention, Satisfactory Progress and Graduation Rates (<u>See NEASC Data First forms – Now NECHE</u>): The DPRC should review the baseline program data for the last 5 years to determine the health of the program in its current state. Baseline Program data includes five-year data on the following: FTE in the major, Retention rates, Six Year Graduation rates, Demographic information (gender, ethnicity, first generation). Additional data may include: percent of students on academic probation and on the Dean's list, evaluation of gateway courses and their impact on student progress to degree completion, impact of program specific recruiting efforts, and assessment of any department-wide advising efforts where applicable.

G. Assessment of Resource Needs: The DPRC should examine the program resources (human, physical and fiscal) in terms of their adequacy in supporting the program in its effort to meet its mission, goals, and objectives.

1. For faculty and staff, the DPRC should review faculty credentials to determine if they are appropriate to discipline and determine sufficiency of current staffing to support the program. Consider the ability to staff regular course rotations, faculty-student ratio, advising loads, and adjunct ratios.

2. For facilities, the DPRC should describe the spaces and technologies allocated to this program and determine if they are sufficient for current needs and if there a need to expand facilities in the next 7 years based on your enrollment and curriculum plans.

H. Public Disclosure and Integrity: The DPRC should review the program's compliance with Federal and NEASC standards with regard to public disclosure and integrity. This includes all communication about the program in the university catalog (print and electronic versions), websites, Facebook, and other social media.

I. Evaluation, Planning and Projections: The DPRC should review all information in the report to develop an overall assessment of the program's quality and viability. From this information, the DPRC should develop an action plan for the next seven (7) years to address any curriculum, enrollment, or staffing challenges, or opportunities for growth. The plan should describe the aspects of the program that will be maintained, deleted, and/or modified and those changes should be discussed in relation to program quality, enrollment projections, and resource implications. In the event that program closure is recommended, a plan to accommodate existing students in the program should be developed.

J. Required Appendices

1. Baseline Program Data from the past five years (Data First Forms)

2. Assessment Plans, NEASC Forms E Series, Assessment Reports and Data from the past five years.

3. For programs with discipline specific accreditation, a map of how NEASC and the discipline standards are aligned.

4. Report from External Evaluators

III. Role and Selection of External Evaluators

The program review process includes an external evaluation to provide feedback and guidance from qualified faculty and/or professionals in the discipline. For programs with specialized accreditation, the selection process and format of such a report will conform to the accrediting body's guidelines. For those programs with NEASC accreditation only, the following guidelines should be followed:

A. The DPRC will suggest to the Dean up to six (6) potential candidates to serve as external evaluators. Candidates shall include individuals from NEASC institutions and/or practitioners in the field and/or members of professional associations related to the discipline.

B. The Dean will review the curriculum vitae of potential external evaluators with the Provost before approving the team of evaluators. A team will usually include two (2) evaluators. In case of a disagreement in the selection of candidates, the Dean and DPRC will meet to resolve the issue.

C. The Dean will contact the recommended individuals and make arrangements concerning duties, timeline, and compensation (travel, honoraria, and additional stipend for writing the final report).

IV. Program Review Timeline

A. Year 1

1. Notification of the start of a program review from the Provost by May 1.

2. Selection of Departmental Program Review Committee (DPRC) at the first department meeting in September.

3. Collection of self-study data by the committee, facilitated by the office of Institutional Research and Assessment completed by January 30.

4. Recommendations for external evaluation to the appropriate Dean by February 1.

5. The Dean, in consultation with the Provost selects two external evaluators. (For programs with discipline specific accreditation, the protocol will follow the recommendations of the accrediting body).

6. Analysis of data and preparation of the Self Study Report completed by May 1. The maximum length of the report is six (6) pages, excluding appendices. The DPRC submits the document to the program's faculty, Chair, and Dean for review and reaction. If revisions are necessary, they should be incorporated into the report no later than the start of the fall term.

B. Year 2

1. Self-study report and action plan are submitted to the external evaluators no later than September 15.

2. External evaluators conduct a site visit no later than the second week in November.

3. External evaluators submit a written report to the Department and Dean by December 15.

4. The Dean and DPRC review the report of the external evaluators. If the DPRC wishes to respond to the external review, that response is due to the Dean by January 15.

5. The Dean provides a summary report and any recommendations, and all Program Review Materials (Program Review Report, Action Plan, and External Evaluation) to the Provost by February 1.

6. The Provost forwards all program review documents to the appropriate Senate Committee (CUCAS or the Graduate Council) by February 15.

7. The Senate committee reviews all documents and makes a recommendation to the Provost later than April 1.

8. The Provost submits all relevant documents to the President in May.

9. The Provost provides the DPRC and Dean with written reactions and recommendations by July 1.

10. The Provost submits a summary report to Board of Regents by September 1st.

C. Year 3-7 Implementation of the Action Plan

Faculty Handbook page 195.

Appendix B: Faculty Qualifications and Course Assignments

Ellen Abate

- BS Nursing: Mount St. Mary College
- MA Nursing: New York University
- Ed.D. Nursing Education: Columbia University
- Teaching responsibilities; Undergraduate, Ed. D

Diane Bennet

- Diploma Nursing: Arnot-Ogden Memorial Hospital
- BS Nursing: Beth-El College of Nursing
- MSN Nursing: University of Hartford
- Ed.D. Nursing Education: WCSU/SCSU
- Teaching responsibilities; Undergraduate

Kimberlee Bridges

- BS Psychology: Sacred Heart University
- BS Nursing: Fairfield University
- MS Nursing: Fairfield University
- Ed.D. Nursing Education: Columbia University (currently enrolled)
- Teaching responsibilities- Undergraduate

Daryle Brown

- BS Nursing: Kent State University
- MA Nursing: Education Columbia University
- MEd Nursing Education: Columbia University
- Ed.D. Nursing Education: Columbia University
- Teaching Responsibilities- Undergraduate

Eileen Campbell

- AD Nursing: Hostos Community College
- BS Nursing: Lehman College
- MS Nursing: Western Connecticut State University
- Ed.D. Nursing Education: Western Connecticut State University/Southern Connecticut State University
- Teaching responsibilities- Undergraduate, Graduate-MS, ED. D

Patricia Cumella

- BS Nursing: SUNY Downstate
- MS Nursing Administration: Adelphi University
- Ed.D. Nursing Education: Western Connecticut State University/Southern Connecticut State University
- Teaching Responsibilities- Undergraduate

Mary Ellen Doherty

- BS Nursing: Mount St. Mary College
- MS Nursing: Rutgers University
- Certificate Nurse Midwifery: University of Medicine and Dentistry Newark, NJ
- Ph.D. Nursing: University of Rhode Island

- Teaching Responsibilities- Undergraduate, MS, Ed. D

Linda Dalessio

- AD Social Work Naugatuck Valley Community College
- AD Nursing: Capitol Community College
- BS Nursing: Regents College
- MS Forensic Nursing: Quinnipiac University Hamden, CT
- Post Master's Certificate Acute Care Nurse Practitioner: St. Louis University
- Ed.D. Nursing Education: Western Connecticut State University/Southern Connecticut State University
- Teaching Responsibilities- Undergraduate, MS

Doreen Graham

- BS Nursing: University of St. Joseph
- MS Nursing Education: Southern Connecticut State University
- Post Graduate Certificate Family Nurse Practitioner: Fairfield University
- Ed.D. Nursing Education: Western Connecticut State University/Southern Connecticut State University (Currently Enrolled)
- Teaching Responsibilities - Undergraduate, MS

Andrew Hull

- BS Nursing: Western Connecticut State University
- MS Nursing Clinical Nurse Specialist: Western Connecticut State University
- Simulation throughout the curriculum

Jeanette Lupinacci

- BS Nursing: Quinnipiac University
- MS Nursing: Western Connecticut State University
- Ed.D. Ed Leadership: University of Hartford
- Teaching Responsibilities- Undergraduate, MS, ED. D

Jennifer Ort

- BS Nursing: Dominican College
- MS Nursing Education: Mercy College
- DNSc Nursing: Sage Colleges
- Teaching responsibilities- Undergraduate

Mary Nielson

- BS Nursing: Western Connecticut State University
- MS Nursing Education: Southern Connecticut State University
- Post Master's APRN: Western Connecticut State University
- DNP Nursing: Sacred Heart University Fairfield, CT
- Ed.D. Nursing Education: Western Connecticut State University/Southern Connecticut State University
- Teaching Responsibilities- Undergraduate, MS

Bozena Padykula

- AS Nursing: Capital Community College
- BS General Studies: Charter Oak College

- MS Nursing: University of Hartford
- Post Master's Psychology Nurse Practitioner: St. Joseph College
- Ed.D. Educational Leadership: University of Hartford
- Teaching Responsibilities- Undergraduate, MS

Barbara Piscopo

- BS Nursing: Fairleigh Dickinson
- MS Education: Western Connecticut State University
- MEd Nursing Education: Columbia University
- Ed.D. Nursing Education: Columbia University
- Teaching Responsibilities- Undergraduate, Ed. D

Teresa Puckhaber

- Diploma Nursing Western Memorial Regional Hospital SN Corner Brook, Newfoundland, Canada
- BS Nursing: Western Connecticut State University
- MS Nursing Clinical Nurse Specialist: Western Connecticut State University
- Ed.D. Nursing Education: Western Connecticut State University/Southern Connecticut State University -currently enrolled
- Teaching responsibilities- Undergraduate

Catherine Rice

- AAS Nursing: Rockland Community College
- MA Nursing: New York University
- Post Masters Adult/Gerontology Nurse Practitioner: Western Connecticut State University
- Ed.D. Educational Leadership: University of Bridgeport
- Teaching responsibilities; Undergraduate

Monica Sousa

- BS Nursing: Western Connecticut State University
- MS Nursing – Clinical Nurse Specialist: Western Connecticut State University
- Ed.D. Nursing Education: Western Connecticut State University/Southern Connecticut State University
- Teaching responsibilities; Undergraduate, MS

Linda Warren

- Diploma: Cooley Dickinson Hospital School of Nursing
- BS Nursing: Southern Connecticut State University
- MS Nursing: University of Hartford
- Ed.D. Educational Leadership: University of Hartford
- Teaching Responsibilities; Undergraduate, MS, Ed. D

Appendix C: BOR Licensure and Accreditation Policy

1.2	CSCU Academic Programming Approval Policy	BR 19-075	2019-05-09

Policy Statement

Purpose

Connecticut State Statutes empower the Connecticut Board of Regents (BOR) to grant the state's accreditation of the institutions of the Connecticut State Colleges and Universities (CSCU) System and their academic programs, therein authorizing them to operate and confer higher education credentials. Additionally, the BOR is charged with authorizing approval for the establishment of new academic programming and of changes therein.

The primary goal of the academic programming approval policy and its procedural guidelines is to expedite the various layers of the review process while assuring that programming quality, need, demand, and requisite resources and capacities are demonstrated and can be subjected to periodic accountability. It is also essential that academic programming is aligned with the mission of the Connecticut State Colleges and Universities (CSCU) System and simultaneously with the mission of the applicable CSCU institution.

Domain

It is the Policy of the BOR that its prior approval is required for the following institutional actions regarding academic programming:

- Establishment of a New Academic Program
- Continued Licensure and Accreditation of an Academic Program
- Replication of a College of Technology Program
- Establishment of a CSCU Center/Institute
- Modification of an Academic Program
- Suspension of an Academic Program
- Discontinuation of an Academic Program

The operating principles for the approval process are:

Nimbleness – streamlining the approval process while ensuring reverence for the significance of each layered step

Responsiveness – paying close attention to the needs of students, the state, and the individual institutions

Effectiveness – advancing institutional distinctiveness and their productive use of resources, while promoting opportunities for academic innovation, economic growth, and development, and (inter-institutional and inter-disciplinary) collaboration

The CSCU Office of the System's Provost and Senior Vice-President for Academic and Student Affairs is charged with developing and revising as necessary forms to expedite the application process for those actions requiring BOR approval. The downloadable applications forms are to be

readily available to institutional officials, faculty, and staff on the System's website.

Procedural Guidelines

I. New Academic Programming

  A. Concept Paper for New Academic Program

    1. Per the institution's established procedures, a *Concept Paper for New Academic Program* is developed and approved internally. With the endorsement of the Chief Academic Officer (CAO), the *Concept Paper* is submitted by initiator(s) and/or CAO to the System Office of the Provost.

    2. After verifying the *Concept Paper* is in order, the designated Academic Affairs staff member in the Office of the Provost arranges via the Administrative Assistant for the *Concept Paper* to be placed on the agenda and within the agenda package for the next meeting of the CSCU Academic Council (AC), for its consideration.

    3. The *Concept Paper* is presented to the AC at its meeting by the CAO and/or initiator(s) and the AC responds with questions and its feedback having read the *Concept Paper* prior to the meeting. The AC advises the initiator(s) and CAO as to whether or not it is advisable that a full proposal be developed and what clarifications and/or improvements are suggested, if any.

  B. Application for New Program Approval

    1. If the institution elects to proceed with establishing the proposed new program, per its established procedures and incorporating the AC's feedback to the *Concept Paper*, the *Application* form for New Program Approval is completed and approved internally. With the endorsement of the CAO, the *Application* is submitted by initiator or CAO to the Office of the Provost.

    2. After verifying the *Application* is in order, the Academic Affairs staff arranges for the *Application* to be placed on the agenda and within the agenda package for the next meeting of the AC, for its consideration.

    3. The *Application* is presented to the AC at its meeting by the CAO and/or initiator(s) and the AC responds with questions and its feedback having read the *Application* prior to the meeting. After the deliberations, the AC takes an <u>action vote</u> to:

      a. reject the application, or

      b. ask for specified clarifications and/or improvements to be made in application and its re-submission to the AC, or

      c. ask for specified clarifications and/or improvements to be made in application and its submission to the Academic and Student Affairs (ASA) Committee, for its consideration with the AC's recommendation for approval, or

      d. recommend that the ASA approve the application

    4. Staffers in the Office of the System Provost will prepare a Staff Report to introduce the *Application* to the ASA – the components of an academic approval Staff Report will include the AC endorsement and the recommendation of the System Provost; and a Board Resolution.

    5. The *Application* is presented to the ASA at its meeting by the CAO and/or initiator(s)

and the ASA responds with questions having read the *Application* prior to the meeting. After clarifications by the initiator(s) and/or CAO and any further discussion, the ASA votes on whether or not to approve the establishment of the proposed new program, or to requests that specified clarifications and/or improvement be made in the application prior to it being re-submitted to the ASA for re-consideration. An affirmative vote generally triggers the *Application's* Staff Report and Board Resolution being placed on the Consent Agenda of the full Board at its next meeting.

NOTES: New academic programs are: degrees, degrees with option(s), degrees with certificate(s), and certificates (stand-alone and credit-bearing). All applications to establish a new program will be considered for both Licensure and Accreditation by the BOR for a period of seven semesters beginning with its initiation.

C. Application for Continued Licensure and Accreditation

1. If the institution elects, after the census date of the program's seventh semester, per the institution's established procedures, the *Application* form for Continued Licensure and Accreditation is completed and approved internally. With the endorsement of the CAO, the *Application* is submitted by initiator or CAO to the Office of the Provost.

2. After verifying the *Application* is in order, the Academic Affairs staff arranges for the *Application* to be placed on the agenda and within the agenda package for the next meeting of the AC, for its consideration.

3. The *Application* is presented to the AC at its meeting by the CAO and/or initiator(s) and the AC responds with questions and its feedback having read the *Application* prior to the meeting. After the deliberations, the AC takes an <u>action vote</u>.

4. Staffers in the Office of the System Provost will prepare a Staff Report to accompany the *Application* to be forwarded to the ASA – the components of an academic approval Staff Report will include the AC endorsement and the recommendation of the System Provost and a Board Resolution.

6. The *Application* is presented to the ASA at its meeting by the CAO and/or initiator(s) and the ASA responds with questions having read the *Application* prior to the meeting. After clarifications by the initiator(s) and/or CAO and any further discussion, the ASA votes on whether or not to approve the continued licensure and accreditation the program, or to request that specified clarifications and/or improvement be made in the application prior to it being re-submitted to the ASA for re-consideration. Alternatively, the ASA may elect to recommend licensure and accreditation of the program for an additional five semesters and the subsequent submission of an *Application* form for Continued Licensure and Accreditation. An affirmative vote or alternative option generally triggers the *Application's* Staff Report and Board Resolution being placed on the Consent Agenda of the full Board at its next meeting.

NOTE: If a program meets the definition of Low Completer at the time of submission of an *Application for Continued Licensure and Accreditation* and the institution opts to recommend Program Continuation, the requisite Improvement Plan (Section 4: of the *Application*) must incorporate the applicable elements of the Improvement Plan option for Program Continuation of the Academic Program Review/Low Completer Review Process.

D. Replication of College of Technology Program by Another Community College

PREMISE: Per BOR Policy, Community colleges may replicate a College of Technology's Engineering Science or Technology Studies academic program (Associate of Science degree, Certificate, and Program Option) or modification previously approved by the Board of Regents for another Community College; contingent upon a replication approval process wherein:

1. The replicating community college submits a Letter of Intent to the College of Technology (COT) Executive Director with an accompanying operational plan and budget from that institution's chief executive officer and/or chief academic officer;

2. The COT Executive Director forwards the replication request and an affirming recommendation to the System Provost/Senior Vice President for Academic and Student Affairs,

3. The System Provost facilitates a review of the replication request by the Academic and Student Affairs Committee (ASA) of the Board of Regents, including preparation of a Staff Report and accompanying documents, and presentation of the request by the replicating community college's CAO, faculty/staff and/or COT Executive Director present request to ASA,

4. The ASA rejects, request further information or recommends approval of the replication request

5. The Board of Regents consents or rejects the ASA recommendation

NOTES: The Letter of Intent requires completion of the *Application* form for *New Program Approval – Replication of a COT Program*.

As a new academic program, replication of a COT program will be licensed and accredited for seven semesters and must submit an *Application* form for Continued Licensure and Accreditation therein, as outlined above in section C.

E. New CSCU Center or Institute

1. Per the institution's established procedures, a *Concept Paper for the Establishment of a CSCU Center/Institute* is developed and approved internally. With the endorsement of the chief academic officer (CAO), the *Concept Paper* is submitted by initiator(s) and/or CAO to the System Office of the Provost.

2. After verifying the *Concept Paper* is in order, the Academic Affairs staff member in the Office of the System Provost arranges via the Administrative Assistant for the *Concept Paper* to be placed on the agenda and within the agenda package for the next meeting of the CSCU Academic Council (AC), for its consideration.

3. The *Concept Paper* is presented to the AC at its meeting by the CAO and/or initiator(s) and the AC responds with questions and its feedback having read the *Concept Paper* prior to the meeting. The AC advises the initiator(s) and CAO as to whether or not it is prudent that a full proposal be developed and what clarifications and/or improvements are suggested, if any.

4. If the institution elects to proceed, a *Proposal to Establish a CSCU Center/Institute* incorporating the AC's feedback to the *Concept Paper* is completed and approved internally. With the endorsement of the CAO, the *Proposal* is submitted by initiator or CAO to the Office of the System Provost.

5. After verifying the *Proposal* is in order, the Academic Affairs staff arranges for the *Proposal* to be placed on the agenda and within the agenda package for the next meeting of the AC, for its consideration.

6. The *Proposal* is presented to the AC at its meeting by the CAO and/or initiator(s) and the AC responds with questions and its feedback having read the *Proposal* prior to the meeting. After the deliberations, the AC takes an <u>action vote</u>.

7. Staffers in the Office of the System Provost will prepare a Staff Report to accompany the *Proposal* to be forwarded to the ASA – the components of an academic approval Staff Report will include the AC endorsement and the recommendation of the System Provost and a Board Resolution.

8. The *Proposal* is presented to the ASA at its meeting by the CAO and/or initiator(s) and the ASA responds with questions having read the *Proposal* prior to the meeting. After clarifications by the initiator(s) and/or CAO and any further discussion, the ASA votes on whether or not to approve the establishment of the proposed new Center/Institute, or to requests that specified clarifications and/or improvement be made in the application prior to it being re-submitted to the ASA for re-consideration. An affirmative vote generally triggers the *Proposal's* Staff Report and Board Resolution being placed on the Consent Agenda of the full Board at its next meeting.

II. Modification of Accredited Program

1. Per the institution's established procedures, the *Application* form for the Modification of Accredited Program is completed and approved internally. With the endorsement of the CAO, the *Application* is submitted by initiator(s) or CAO to the System Office of the Provost.

2. After verifying the *Application*, the Academic Affairs staff arranges for the *Application* to be placed on the agenda and within the agenda package for the next meeting of the AC, for its consideration.

3. The *Application* is presented to the AC at its meeting by the CAO and/or initiator(s) and the AC responds with questions and its feedback having read the *Application* prior to the meeting. After the deliberations, the AC takes an <u>action vote</u>.

4. Office of the Provost staffers will prepare a Staff Report and Board Resolution, and any appropriate documents to accompany the *Application* to be forwarded to the ASA.

5. The *Application* is presented to the ASA at its meeting by the CAO and/or initiator(s) and the ASA responds with questions having read the *Application* prior to the meeting. After clarifications by the initiator(s) and/or CAO, the ASA votes on whether or not to approve the proposed modification of the program. An affirmative vote generally triggers the Modification's Staff Report and Board Resolution being placed on the Consent Agenda of the full Board at its next meeting.

NOTES: A program modification is a substantive change to a previously approved (licensed and accredited) academic program, as defined on the *Application* form for program modification. For a simple name change modification of an accredited program, a short *Application for Name Change*-Accredited Academic Program-*Modification* form is available. Likewise, abbreviated Modification of Accredited Program application forms are available for *CIP Code Number Change* and *Adding an Auxiliary Instructional Site*. An *Application* for *CIP Code Change* will not be reviewed by either the AC or ASA – it will be processed by the Office of the System Provost for submission to the Office of Higher Education.

III. **Discontinuation or Suspension of Existing Program**
1. Per the institution's established procedures, the *Application* form for the Discontinuation of Existing Program or Suspension of Existing Program is completed and approved internally. With the endorsement of the CAO, the *Application* is submitted by initiator(s) or CAO to the System Office of the Provost.

2. After verifying the *Application*, the Academic Affairs staff arranges for the *Application* to be placed on the agenda and within the agenda package for the next meeting of the AC, for its consideration.

3. The *Application* is presented to the AC at its meeting by the CAO and/or initiator(s) and the AC responds with questions and its feedback having read the *Application* prior to the meeting. After the deliberations, the AC takes an <u>action vote</u>.

4. Office of the Provost staffers will prepare a Staff Report and Board Resolution, and any appropriate components to accompany the *Application* forwarded to the ASA.

5. The *Application* is presented to the ASA at its meeting by the CAO and/or initiator(s) and the ASA responds with questions having read the *Application* prior to the meeting. After clarifications by the initiator(s) and/or CAO, the ASA votes on whether or not to approve the discontinuation or suspension of an existing program. An affirmative vote generally triggers the program disposition's Staff Report and Board Resolution being place on the Consent Agenda of the next BOR meeting.

NOTE: The Academic Council will undertake its deliberation of an application for program discontinuation or suspension only if a member raises a substantial concern or question, or per the discretion of the System Provost. Likewise, the ASA will undertake its

deliberation if a member raises a substantial concern or question, or upon the recommendation of the System Provost.

PROCEDURAL NOTES

1. In order for an academic program approval document to be included in the agenda of the next meeting of the CSCU Academic Council, it must be received electronically in the Office of the System Provost to the attention of the Administrative Assistant at least 10 business days prior to that meeting. Otherwise, the approval document will be considered by the Academic Council at its subsequent meeting.

2. All required data and information in approval forms must be complete, including CIP Code numbers and OHE numbers for existing programs in order to be presented to the Academic Council.

3. In submitting or authorizing an application to the Academic Council, the chief academic officer is assuring the Council that the institution's internal (development and review) processes have been completed with approvals.

4. A number of institutional actions regarding academic programming does not require prior approval by the BOR. Such actions include:

   a) establishment or modification of degree minors, concentrations, and specializations,

   b) establishment or modification of undergraduate certificates or 15 or fewer credit hours, or graduate certificates of 12 or fewer semester hours, and

   c) establishment or modification of non-credit-bearing certificates, and

   d) establishment or modification of academic programs that do not qualify students to become eligible for federal financial aid

However, CSCU institutions are required to inform the BOR of their establishing the academic programming listed above via an Informational Report, outlined below:

Below Threshold Proposal

1. Per the institution's established procedures, the *Information Report Form* for the establishment of a New Academic Offering at *Below-Threshold* standards is completed and approved internally. With the endorsement of the chief academic officer (CAO), the form is submitted by initiator(s) or CAO to the System Office of the Provost.

2. After verifying the *Information Form* is in order – that the proposed program's requirement for course credit hours does not exceed the threshold requiring BOR action or the definition of academic programming requiring prior BOR approval, the Academic Affairs staff arranges for the New Academic Offering to be placed sequentially on the agendas of the AC, ASA and BOR as an Information Item.

May 9, 2019

Appendix D: BOR Low-Completer Program Policy

Connecticut Board of Regents for Higher Education

Proposal: Amend Academic Program Review Policy

History

The Board of Regents established the Academic Program Review Policy on August 21, 2014 declaring academic program review to be integral to academic planning and assessment efforts at the institutional level. The Board considers APR to be a means of ensuring continuous quality improvement of academic programs and an informative instrument to facilitate dialogue among the Regents, System administrators and institutional administrators. Key elements of such discussions include reflections on educational practices and the review of academic programs within the totality of academic offerings at the institutional level.

Purpose

State statutes empower the Board of Regents (BOR) to grant accreditations to the institutions of the Connecticut State Colleges and Universities (CSCU) System and their academic programs; therein authorizing them to operate and confer higher educational credentials (Connecticut General Statutes, Sections 10a-143, 10a-87 and 10a-72). Degrees are conferred by the BOR in their capacity as the board of trustees of the specific constituent unit.

Among the BOR's responsibilities is assuring the public about the educational quality and effectiveness of the credential-granting institutions it governs. NECHE standard 3.15, however, notes, "The [accredited] institution places primary responsibility for the content, quality, and effectiveness of the curriculum with its faculty. Faculty have a substantive voice in matters of educational programs…" Therefore, when the BOR questions the efficacy of a program the faculty and academic dean/provost at that institution shall be encouraged to offer data and documentation supporting the retention of the program if they believe maintaining the program is in the best interests of their students and their community.

The BOR's Academic Program Review (APR) Policy is its chief instrument for quality assurance - the principal, catalytic mechanism for assessing program quality and effectiveness, and providing information for the continuous quality improvement of teaching and learning. In determining program viability, the BOR relies heavily upon the CSCU institutions to employ APR as a tool for quality control. Within that control is a forthright self-study, which specifically includes an examination of the degree to which an academic program confers the credential(s) for which it was established.

This policy amendment is enacted to facilitate a process to conduct reviews of low producing academic programs in terms of the program's productivity over a three-year period – see Definition below. This aspect of program review is also applicable to considerations regarding the duplication of existing programs as an evaluative tool to determine a program's viability and continuation. The assessment analysis, and outcomes that result will contribute to making higher education more efficient, sustainable, and valuable to the state of Connecticut and its citizenry.

Definition

An academic program is to be examined as a **Low Completer** if it has, at the point of its periodic

reporting to the BOR, a three-year average fewer than the following number of credentials conferred:

Credential	Productivity Level
Undergraduate Certificate	12 (avg. 4 per year)
Associate Degree	24 (avg. 8 per year)
Bachelor's Degree / Post-Bachelor's / Graduate Certificate	30 (avg. 10 per year)
Masters' Degree / Post-Masters	15 (avg. 5 per year)
Doctoral	3 (avg. 1 per year)

In the interest of uniformity, all programs at all institutions will be subject to these guidelines. This includes programs granted some type of maintenance provision (temporary, conditional, or unconditional) in the most recent review.

Preliminary Screening

The System's Office of Research & System Effectiveness (ORSE) will provide each CSCU institution with a roster of academic programs that appear to meet the **Low Completer** definition. ORSE will compile data from the federal Integrated Postsecondary Education Data System (IPEDS) reporting for the 2014-15, 2015-16 and 2016-17 academic years. Hence, the institutions will be afforded the opportunity to *examine programs that meet the low completer designation,* adding completions data for the 2017-18 academic year. Consequently, the institutions must decide upon a course of action outlined below in the Process.

Recommendations resulting from the preliminary screening are to be presented to the Board of Regents for its consideration via the System Office of the Provost and Senior Vice President for Academic and Student Affairs.

In subsequent years, the examination of **Low Completer** programs becomes an element of the annual academic program review process. The APR Policy requires "all academic programs to undergo a comprehensive review" and states that "at a minimum, each degree and certificate granting program is subject to review at least once every seven-years." An APR formal report, per the CSCU institution's format/structure, is due to the institution's chief academic officer or his/her designee by June of the program's reporting year. The institution's synopsis of all the formal reports submitted that reporting year is due to the System Office of the Provost in August. In that synopsis – the End-of-Year Report (APR Form 2) – those academic programs meeting the **Low Completer** definition must be identified in column (d), with one of the four recommending actions stipulated below:

Process

The reporting academic program deemed a **Low Completer** in consultation with the institution's chief academic officer must recommend one of the following actions to the BOR at designated periods of time:
- Program Termination
- Program Suspension
- Program Consolidation
- Program Continuation

Termination

Community College and Charter Oak State College program officials, with the explicit approval of the institution, submits an *Application for Discontinuation of Existing Program*, per the System's existing procedures and instructions of the application form which includes a Phase Out / Teach out Strategy. State University officials shall follow the process set forth in the CSU- AAUP BOR Collective Bargaining Agreement.[1]

Suspension

Program officials, with the explicit approval of the institution, submits an *Application for Suspension of Existing Program*, per the System's existing procedures and instructions of the application form which includes a Phase Out / Teach out Strategy, as well as a projected reinstatement or termination date.

Consolidation

Program officials, with the explicit approval of the institution, submits a rationale for program consolidation that address each of the following issues:

- A brief description of what the consolidation would entail and a plan for implementation, including program modality and any curricular adjustments;
- Reasons why a consolidated program would succeed as compared to previous arrangements;
- Anticipated fiscal impact and opportunities for reinvestment, with consolidation;
- All relevant issues identified in the program's formal APR report

Continuation

Program officials, with the explicit approval of the institution, submits an A. Improvement Plan B. Zero Fiscal-Impact Statement; or C. A rationale for program continuation that addresses contributions of the Program to Students, the Community, and/or the Institution.

A. An Improvement Plan to increase program completions should address each of the following applicable issues in the order presented:

1. Brief description of the program, to include enrollment by year classification, faculty supporting the program by type (T/TT, FT, PT, adjunct, other), space/facilities, and administrative support;
2. Projected enrollees and completers for the next five years with justification for such projections.

B. The program is deemed to have a zero fiscal impact it was to be either continued or terminated; and the following issues are addressed:

1. The parent degree program and its actual enrollments and completions for the preceding three academic years;
2. Any curricular elements required for the certificate but not for the degree, and their faculty inputs;
3. Projected program enrollees and completers for the degree program, for the next three years with justification for such projections; and
4. Projected total revenue and total expenditures for the degree program, for the next three years.

---

[1] See Section 5.20 CSU-AAUP BOR Collective Bargaining Agreement.

C. A description of the contributions of the program to students, the community, and/or the institution should address each of the applicable items in the order presented:

   1. The parent degree program and its actual enrollments and completions for the preceding three academic years (this need not be repeated, if the rationale for continuation includes A or B above);

   2. Contribution to economic development (and/or workforce) of the state;

   3. Uniqueness or relevance of the program to the region or area;

   4. Institutional need to maintain this program to support other programs, contributions of program faculty to General Education, or to maintain accreditation. Measures of productivity of program faculty (i.e. number of student credit hours taught by faculty affiliated with the program or academic discipline) can be included;

   5. Documented costs of revenue loss anticipated with elimination (e.g., recent major investments, external funding support, tuition, etc.);

   6. Placement of graduates (positions held, places of employment, enrollment in graduate or baccalaureate study);

   7. Passage rate of completers on licensure/certification exams or measures;

   8. Program quality as reflected by regional or national reputation, faculty qualifications, and the documented achievements of program graduates;

   9. Measures of program productivity other than numbers of graduates (grants, publications or other); and

   10. In the case where program duplication exists (other programs in the statewide inventory within the same CIP code and level), evidence to warrant the continuation of the degree program when similar programs are available within the state. Plans for collaboration or sharing resources with other programs or new delivery mechanisms may be included as applicable.

After the institution presents and submits its report and recommendation, the BOR will either (a) accept the report or (b) request further information from the institution and program.

Appendix E: Jobs EQ Report for Advanced Practice Nurse Practitioners

JOBS**e Q**

Occupation Report

Nurse Practitioners

Connecticut

Definition of Nurse Practitioners, SOC 29-1171

Diagnose and treat acute, episodic, or chronic illness, independently or as part of a healthcare team. May focus on health promotion and disease prevention. May order, perform, or interpret diagnostic tests such as lab work and x rays. May prescribe medication. Must be registered nurses who have specialized graduate education.

Occupation Snapshot

As of 2019Q4, total employment for Nurse Practitioners in Connecticut was 2,417. Over the past three years, this occupation added 384 jobs in the region and is expected to increase by 292 jobs over the next seven years, or at an annual average rate of 1.6%.

Nurse Practitioners in Connecticut, 2019q4[1]

	Current					3-Year History		7-Year Forecast				
Empl	Avg Ann Wages[2]	LQ	Unempl	Unempl Rate	Online Job Ads[3]	Empl Change	Ann %	Total Demand	Exits	Transfers	Empl Growth	Ann % Growth
2,417	$118,000	1.13	24	1.0%	500	384	5.9%	1,161	344	525	292	1.6%

Source: JobsEQ®
Data as of 2019Q4 unless noted otherwise
Note: Figures may not sum due to rounding.
1. Data based on a four-quarter moving average unless noted otherwise.
2. Wage data are as of 2018 and represent the average for all Covered Employment
3. Data represent found online ads active within the last thirty days in the selected region; data represents a sampling rather than the complete universe of postings. Ads lacking zip code information but designating a place (city, town, etc.) may be assigned to the zip code with greatest employment in that place for queries in this analytic. Due to alternative county-assignment algorithms, ad counts in this analytic may not match that shown in RTI (nor in the popup window ad list).
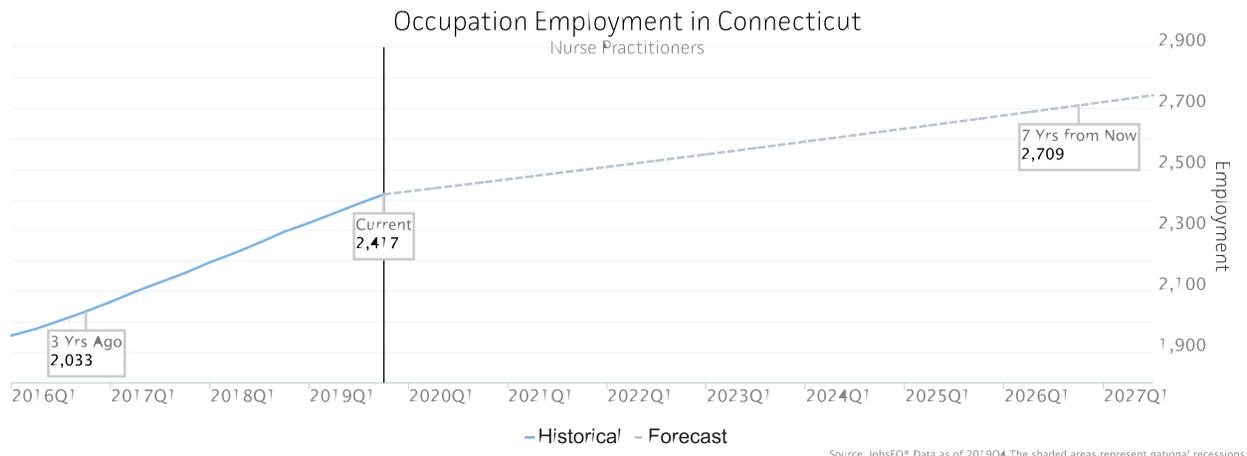
Occupation Employment in Connecticut
Nurse Practitioners

Occupation employment data are estimated via industry employment data and the industry/occupation mix. Industry employment data are derived from the Quarterly Census of Employment and Wages, provided by the Bureau of Labor Statistics and currently updated through 2019Q2, imputed where necessary with preliminary estimates updated to 2019Q4. Wages by occupation are as of 2018 provided by the BLS and imputed where necessary. Forecast employment growth uses national projections from the Bureau of Labor Statistics adapted for regional growth patterns. Occupation unemployment figures are imputed by Chmura.

Geographic Distribution

The below maps illustrate the county-level distribution of employed Nurse Practitioners in Connecticut. Employment is shown by place of work and by residence.

Occupation Concentration by Place of Work for Nurse Practitioners
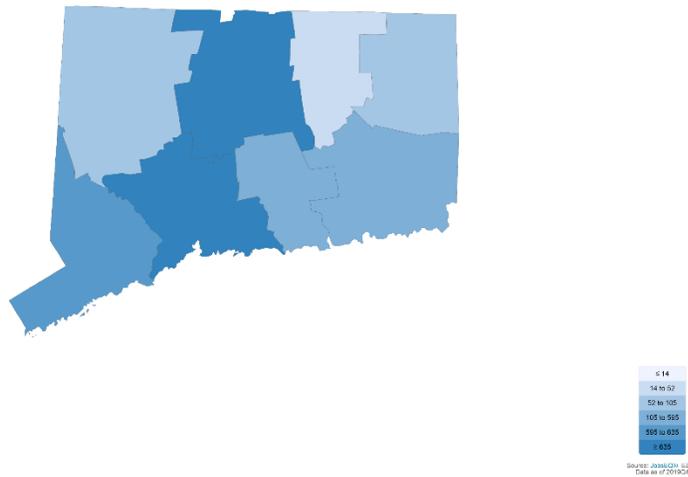
Top Counties by Place of Work for Nurse Practitioners, 2019Q4

Region	Employment
Hartford County, Connecticut	767
New Haven County, Connecticut	635
Fairfield County, Connecticut	596
New London County, Connecticut	141
Middlesex County, Connecticut	105
Litchfield County, Connecticut	58
Windham County, Connecticut	52
Tolland County, Connecticut	49

Source: JobsEQ®

Occupation employment data are estimated via industry employment data and the industry/occupation mix. Industry employment data are derived from the Quarterly Census of Employment and Wages, provided by the Bureau of Labor Statistics and currently updated through 2019Q2, imputed where necessary with preliminary estimates updated to 2019Q4. Occupation by residence data are derived from the same in addition to commuting pattern data.

Top Counties by Place of Residence for Nurse Practitioners, 2019Q4

Region	Employment
New Haven County, Connecticut	653
Fairfield County, Connecticut	646
Hartford County, Connecticut	641
New London County, Connecticut	143
Middlesex County, Connecticut	138
Tolland County, Connecticut	106
Litchfield County, Connecticut	92
Windham County, Connecticut	48

Source: JobsEQ®

Occupation employment data are estimated via industry employment data and the industry/occupation mix. Industry employment data are derived from the Quarterly Census of Employment and Wages, provided by the Bureau of Labor Statistics and currently updated through 2019Q2, imputed where necessary with preliminary estimates updated to 2019Q4. Occupation by residence data are derived from the same in addition to commuting pattern data.

Employment by Industry

The following table illustrates the industries in Connecticut which most employ Nurse Practitioners. The single industry most employing this occupation in the region is Offices of Physicians, NAICS 6211. This industry employs 1,243 Nurse Practitioners—employment which is expected to increase by 221 jobs over the next ten years; furthermore, 639 additional new workers in this occupation will be needed for this industry due to separation demand, that is, to replace workers in this occupation and industry that retire or move into a different occupation.

Top Industry Distribution for Nurse Practitioners (29-1171) in Connecticut

		Current			10-Year Demand		
NAICS Code	Industry Title	% of Occ Empl	Empl	Exits	Transfers	Empl Growth	Total Demand
6211	Offices of Physicians	51.4%	1,243	253	386	221	860
6221	General Medical and Surgical Hospitals	21.3%	514	102	156	66	324
6214	Outpatient Care Centers	10.0%	241	53	81	91	225
6113	Colleges, Universities, and Professional Schools	3.5%	84	16	24	1	40
6213	Offices of Other Health Practitioners	2.9%	70	15	22	19	56
6216	Home Health Care Services	2.4%	59	13	20	22	55
6231	Nursing Care Facilities (Skilled Nursing Facilities)	1.1%	26	5	7	-3	8
6241	Individual and Family Services	1.1%	26	5	8	7	20
5241	Insurance Carriers	0.6%	15	3	4	0	8
6223	Specialty (except Psychiatric and Substance Abuse) Hospitals	0.6%	14	3	5	4	12
5613	Employment Services	0.5%	13	2	4	-1	5
6222	Psychiatric and Substance Abuse Hospitals	0.5%	13	2	4	1	7
	All Others	4.1%	100	19	29	1	49

Source: JobsEQ®
Data as of 2019Q4 except wages which are as of 2018. Note that occupation-by-industry wages represent adjusted national data and may not be consistent with regional, all-industry occupation wages shown elsewhere in JobsEQ.
Note: Figures may not sum due to rounding.
Occupation employment data are estimated via industry employment data and the industry/occupation mix. Industry employment data are derived from the Quarterly Census of Employment and Wages, provided by the Bureau of Labor Statistics and currently updated through 2019Q2, imputed where necessary with preliminary estimates updated to 2019Q4. Forecast employment growth uses national projections from the Bureau of Labor Statistics adapted for regional growth patterns.

Wages

The average (mean) annual wage for Nurse Practitioners was $118,000 in Connecticut as of 2018. For the same year, average entry level wages were approximately $90,400 compared to an average of $131,800 for experienced workers.

Average Annual Wages
Nurse Practitioners in Connecticut, 2018

Source: JobsEQ®

Percentile Wages

Source: JobsEQ®
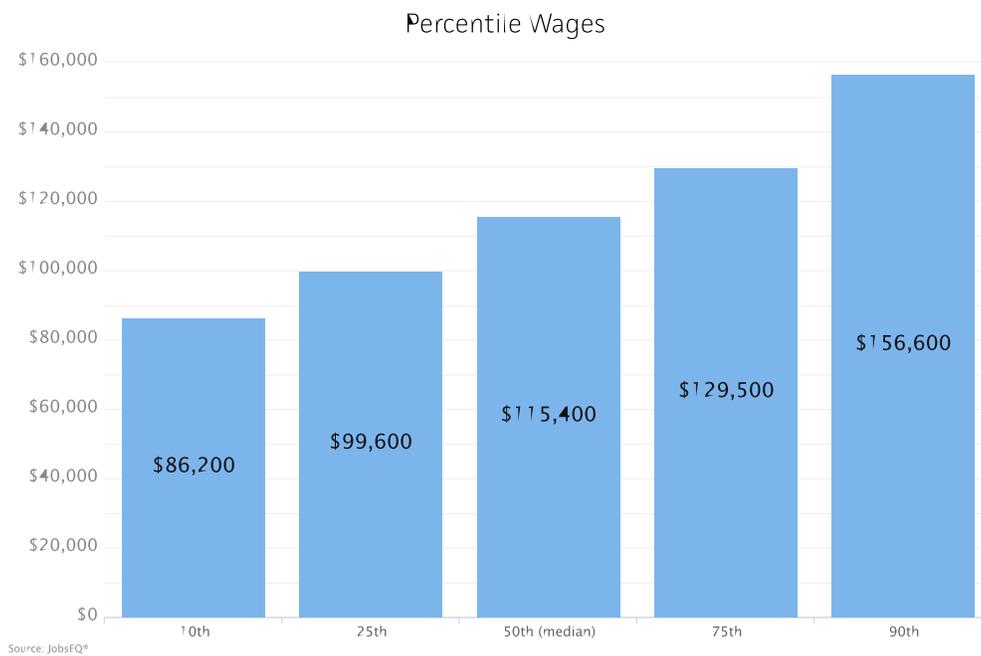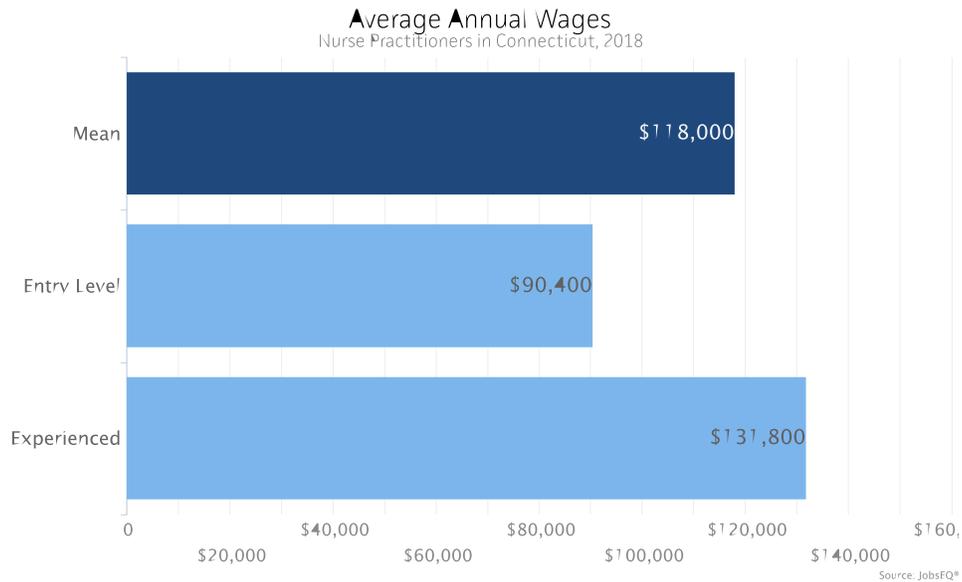
Occupation wages (mean, median, and percentiles) are as of 2018 provided by the BLS, modified and imputed by Chmura where necessary. Entry-level and experienced wages are derived from these source data, computed by Chmura.

Education Profile

Typical education and training requirements for Nurse Practitioners are described below.

Education and Training Requirements

Typical Entry-Level Education:	Master's degree
Previous Work Experience:	None
Typical On-the-Job Training:	None

Source: JobsEQ®

Educational Attainment Profile

Less than High School Diploma 0.1%
High School Diploma or Equivalent 0.4%
Some College, No Degree 0.2%
Associate's Degree 0.2%
Bachelor's Degree 5.0%
Doctoral or Professional Degree 18.1%
Master's Degree 75.9%
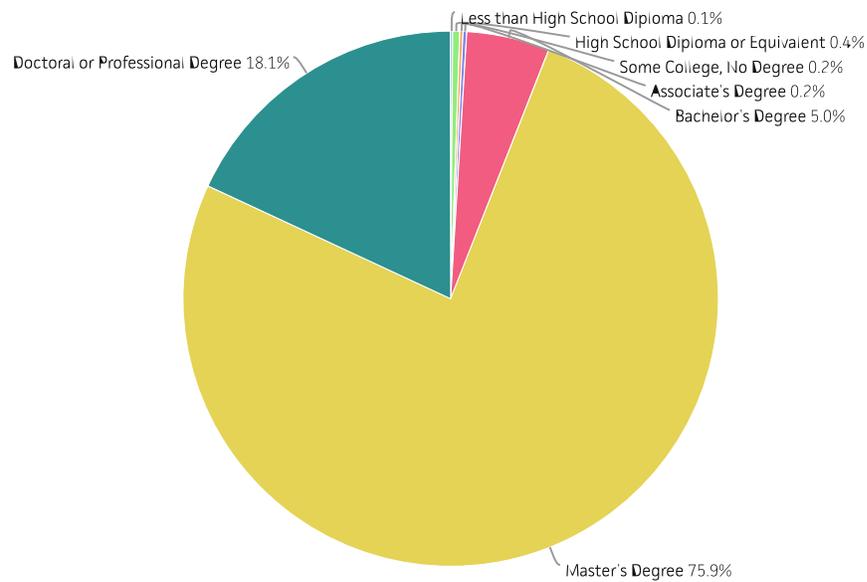
Source: JobsEQ®

Education and training requirements are from the Bureau of Labor Statistics (BLS); educational attainment mix are regional data modeled by Chmura using Census educational attainment data projected to 2019Q4 along with source data from the BLS.

Awards

The table below is a list of postsecondary program awards that were granted by postsecondary institutions located in Connecticut in the 2018 academic year. These programs have been identified as providing training for Nurse Practitioners (for further details, see the source note).

Title/School	Annual Awards - Connecticut		
	Certificates and 2yr Degrees	4yr Degrees	Postgraduate Degrees
51.3803 Adult Health Nurse/Nursing			
Quinnipiac University	0	0	0
University of Connecticut	0	0	0
Western Connecticut State University	0	0	0
51.3805 Family Practice Nurse/Nursing			
Fairfield University	0	0	23
Sacred Heart University	0	0	25
Southern Connecticut State University	0	1	0
Yale University	0	0	0
51.3806 Maternal/Child Health and Neonatal Nurse/Nursing			
University of Connecticut	0	0	0
51.3810 Psychiatric/Mental Health Nurse/Nursing			
Fairfield University	0	0	9
University of Saint Joseph	0	0	10
Yale University	0	0	0
51.3818 Nursing Practice			
Fairfield University	0	0	4
Sacred Heart University	0	0	0
University of Connecticut	0	230	55
University of Saint Joseph	0	0	2
Yale University	0	0	15
51.3899 Registered Nursing, Nursing Administration, Nursing Research and Clinical Nursing, Other			
University of Connecticut	0	2	0
Yale University	0	0	0
Total			
Total	0	233	143

Source: JobsEQ®
Data as of the 2018 academic year
Awards data are per the National Center for Education Statistics (NCES) and JobsEQ for the 2018 academic year. Any programs shown here have been identified as being linked with the occupation being

analyzed. Other existing programs may also provide training in the region for this occupation but have not been so identified by the program-occupation crosswalk (see the FAQ section at the end of this report for more details). Furthermore, any programs shown here reflect only data reported to the NCES; reporting is required of all schools participating in any federal finance assistance program authorized by Title IV of the Higher Education Act of 1965, as amended—other training providers in the region that do not report data to the NCES are not reflected in the above.

Training Concentration

In the 2017-2018 academic year, it is estimated that postsecondary schools in Connecticut granted awards for a potential 198 new Nurse Practitioners.[2] Given the size of this occupation in the region, this award output is below the national norm of 228 awards per year—put another way; it is at 87% of the national average.

Training concentrations above the national average can indicate that the region is an exporter of graduates for this occupation; in other words, some students may come from outside the region for this education and subsequently leave after the award to work outside the region. Training concentrations below the national average can indicate that the region is an importer of graduates for this occupation; in other words, some employers within the region who hire this occupation may need to hire workers who received this training outside of the region.
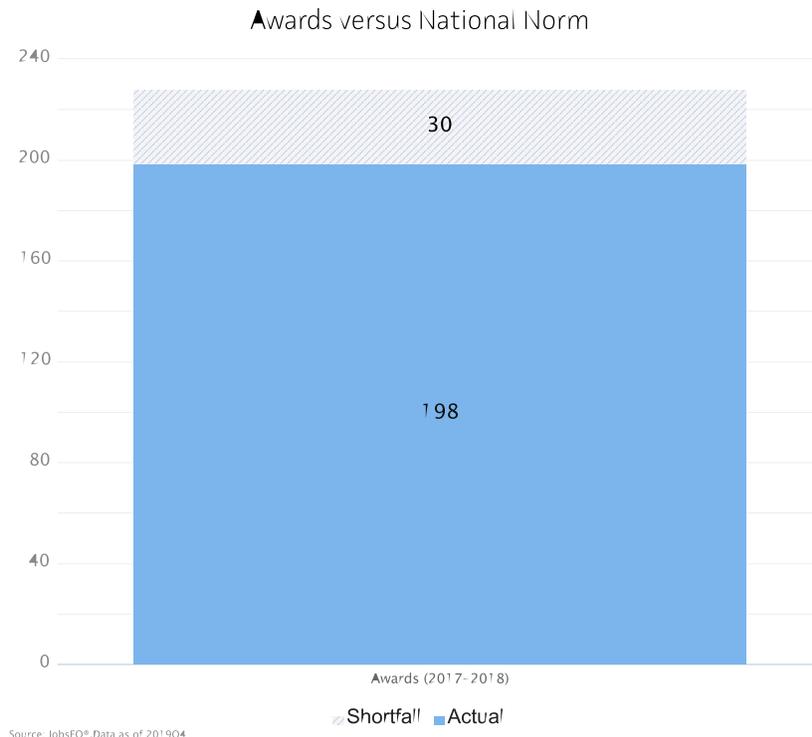
Awards data by occupation are estimates produced by JobsEQ and for the academic year 2017-2018.

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[2] This figure may not match the total awards shown in the prior section since some of those awards may flow into more than one occupation.

RTI (Job Postings)

Occupations

SOC	Occupation	Total Ads	
29-1171.00	Nurse Practitioners	1,141	

Source: JobsEQ®
Data reflect online job postings for the 180 day period ending 4/14/2020
Note: Data are subject to revision. Please do not use the volume of data for historical comparisons until such time that an adjusted historical series of these data are provided.

Locations

Location	Total Ads	
Hartford, Connecticut	67	
New Haven, Connecticut	35	
Connecticut-Hartford-79 Jefferson St HH Bliss Wing	31	
Waterbury, Connecticut	26	
New London, Connecticut	24	
WATERBURY, Connecticut 06701	20	
Danbury, Connecticut	18	
Connecticut-Hartford-80 Seymour Street	17	
HARTFORD, Connecticut 06101	17	
Manchester, Connecticut	15	

Source: JobsEQ®
Data reflect online job postings for the 180 day period ending 4/14/2020
Note: Data are subject to revision. Please do not use the volume of data for historical comparisons until such time that an adjusted historical series of these data are provided.

Employers

Employer Name	Total Ads	
Hartford HealthCare	186	
ENP Network	71	
UnitedHealth Group	53	
Northeast Healthcare Recruitment	45	
Yale New Haven Health	41	
Trinity Health	40	
ANTHEM	36	
Matrix Medical Network	33	
SunBelt Staffing	26	
State of Connecticut	24	
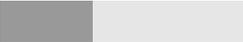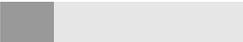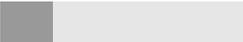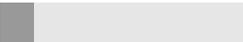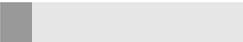
Source: JobsEQ®
Data reflect online job postings for the 180 day period ending 4/14/2020
Note: Data are subject to revision. Please do not use the volume of data for historical comparisons until such time that an adjusted historical series of these data are provided.

Certifications

Certificate Name	Total Ads	
Registered Nurse (RN)	255	
Family Nurse Practitioner (FNP-BC)	112	
Certification in Cardiopulmonary Resuscitation (CPR)	100	
Adult Nurse Practitioner (ANP-BC)	95	
Acute Care Nurse Practitioner (ACNP-BC)	67	
Basic Life Support (BLS)	66	
Adult-Gerontology Acute Care NP (AGACNP-BC)	27	
Advanced Cardiac Life Support Certification (ACLS)	27	
Psychiatric-Mental Health Nurse Practitioner (PMHNP)	11	
Driver's License	6	
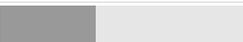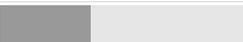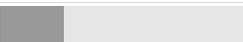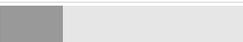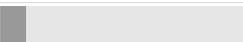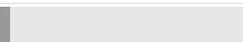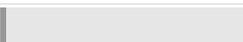
Source: JobsEQ®
Data reflect online job postings for the 180 day period ending 4/14/2020
Note: Data are subject to revision. Please do not use the volume of data for historical comparisons until such time that an adjusted historical series of these data are provided.

Hard Skills

Skill Name	Total Ads	
Health/Wellness	219	
Critical Care	108	
Intensive Care Unit (ICU)	80	
Electronic Medical Record System (EMR System)	78	
Home Health Care	65	
Spanish	54	
Geriatric	52	
Epic Systems	42	
Pediatrics	37	
Oncology	32	

Source: JobsEQ®
Data reflect online job postings for the 180 day period ending 4/14/2020
Note: Data are subject to revision. Please do not use the volume of data for historical comparisons until such time that an adjusted historical series of these data are provided.

Soft Skills

Skill Name	Total Ads	
Cooperative/Team Player	499	
Communication (Verbal and written skills)	327	
Self-Motivated/Ability to Work Independently/Self Leadership	129	
Accountable/Responsible/Reliable/Dependable/Trustworthy	128	
Adaptability/Flexibility/Tolerance of Change and Uncertainty	94	
Organization	87	
Interpersonal Relationships/Maintain Relationships	76	
Enthusiastic/Energetic	58	
Decision Making/Decisiveness	44	
Initiative	44	

Source: JobsEQ®
Data reflect online job postings for the 180 day period ending 4/14/2020
Note: Data are subject to revision. Please do not use the volume of data for historical comparisons until such time that an adjusted historical series of these data are provided.

Job Titles

Job Title	Total Ads	
Nurse Practitioner	49	
Psychiatric Nurse Practitioner	29	
Advanced Nurse Practitioner (40 Hour)	21	
Nurse Practitioner - 1099 Flexible Schedule Provider	21	
nurse practitioner physician assistant	17	
practitioner physician assistant field	15	
Nurse Practitioner - CT Area Locations	11	
Nurse Practitioner - CT	10	
Nurse Practitioner - LTC/Sub Acute Rehab	9	
Nurse Practitioner or Physician Assistant - Field Advanced Practice Provider (4 openings) (PS29637)	9	

Source: JobsEQ®
Data reflect online job postings for the 180 day period ending 4/14/2020
Note: Data are subject to revision. Please do not use the volume of data for historical comparisons until such time that an adjusted historical series of these data are provided.

Education Levels

Minimum Education Level	Total Ads	
Master's degree	204	
Bachelor's degree	58	
Doctoral or professional degree	13	
Unspecified/other	866	

Source: JobsEQ®
Data reflect online job postings for the 180 day period ending 4/14/2020
Note: Data are subject to revision. Please do not use the volume of data for historical comparisons until such time that an adjusted historical series of these data are provided.

Programs

Program Name	Total Ads	
Physician Assistant	161	
Nursing	121	
Nurse Practitioner	35	
Medicine	5	
Clinical	3	
Nursing Practice	3	
Massage Therapy	2	
Psychiatry	2	
Social Science	2	

Source: JobsEQ®
Data reflect online job postings for the 180 day period ending 4/14/2020
Note: Data are subject to revision. Please do not use the volume of data for historical comparisons until such time that an adjusted historical series of these data are provided.

Job Types

Type	Total Ads	
Full-Time	714	
Part-Time	256	
Permanent	74	
Temp-to-Hire	10	
Temporary (unspecified)	8	
Unspecified/other	343	

Source: JobsEQ®
Data reflect online job postings for the 180 day period ending 4/14/2020
Note: Data are subject to revision. Please do not use the volume of data for historical comparisons until such time that an adjusted historical series of these data are provided.

Connecticut Regional Map
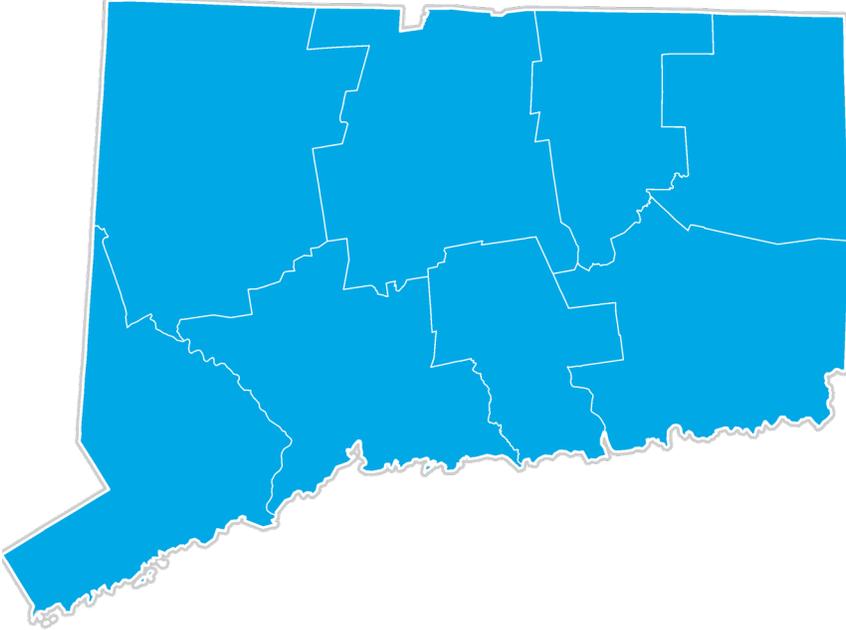
FAQ

What is SOC?

The Standard Occupational Classification system (SOC) is used to classify workers into occupational categories. All workers are classified into one of over 840 occupations according to their occupational definition. To facilitate classification, occupations are combined to form 23 major groups, 97 minor groups, and 461 occupation groups. Each occupation group includes detailed occupations requiring similar job duties, skills, education, or experience.

What is a location quotient?

A location quotient (LQ) is a measurement of concentration in comparison to the nation. An LQ of 1.00 indicates a region has the same concentration of an occupation (or industry) as the nation. An LQ of 2.00 would mean the region has twice the expected employment compared to the nation and an LQ of 0.50 would mean the region has half the expected employment in comparison to the nation.

What is training concentration?

The training concentration analysis compares local postsecondary training output compared to the national norm. Let's consider registered nurses as an example. If in the nation, one RN award is granted for every ten RNs employed, that 1:10 ratio is the national norm. If in your region your schools also grant one RN award for every ten RNs employed, then your region will be right at the national norm, or we say at 100% of the national norm which is termed a 100% training concentration. If your region grants two RN awards for every ten employed, your region would be at twice the national norm or have a 200% training concentration. Similarly, if your region grants one RN award for every twenty employed, your region would be at half the national norm or have a 50% training concentration.

What is the program-to-occupation crosswalk?

Training programs are classified according to the Classification of Instructional Programs (CIP codes). For relating training programs, this report uses a modified version of the CIP to SOC crosswalk from the National Center for Education Statistics (NCES). While this is a very helpful crosswalk for estimating occupation production from training program awards data, the crosswalk is neither perfect nor comprehensive. Indeed, it is hard to imagine such a crosswalk being perfect since many training program graduates for one reason or another do not end up employed in occupations that are most related to the training program from which they graduated. Therefore, the education program analyses should be considered in this light.

As an example of the many scenarios that may unfold, consider a journalism degree that crosswalks into three occupations: editors, writers, and postsecondary communications teachers. Graduates with a journalism degree may get a job in one of these occupations—and that may be the most-likely scenario—but a good number of these graduates may get a job in a different occupation altogether (the job may be somewhat related, such as a reporter, or the job may be totally unrelated, such as a real estate agent). Furthermore, a graduate may stay in school or go back to school for a degree that will lead to other occupation possibilities. Still another possibility includes the graduate not entering the labor market (maybe being unemployed, being a non-participant, or moving to another region).

What is separation demand?

Separation demand is the number of jobs required due to separations—labor force exits (including retirements) and turnover resulting from workers moving from one occupation into another. Note that separation demand does not include all turnover—it does not include when workers stay in the same occupation but switch employers. The total projected demand for an occupation is the sum of the separation demand and the growth demand (which is the increase or decrease of jobs in an occupation expected due to expansion or contraction of the overall number of jobs in that occupation).

What is NAICS?

The North American Industry Classification System (NAICS) is used to classify business establishments according to the type of economic activity. The NAICS Code comprises six levels, from the "all industry" level to the 6-digit level. The first two digits define the top level category, known as the "sector," which is the level examined in this report.

About This Report
This report and all data herein were produced by JobsEQ®, a product of Chmura Economics & Analytics. The information contained herein was obtained from sources we believe to be reliable. However, we cannot guarantee its accuracy and completeness.

Appendix F: AACN Nursing Shortage Report

American Association of Colleges of Nursing

The Voice of Academic Nursing

Fact Sheet:

NursingShortage

CONTACT:

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https://www.aacnnursing.org/News-Information/Fact-Sheets/Nursing-Shortage

The U.S. is projected to experience a shortage of Registered Nurses (RNs) that is expected to intensify as Baby Boomers age and the need for health care grows. Compounding the problem is the fact that nursing schools across the country are struggling to expand capacity to meet the rising demand for care given the national move toward healthcare reform. The **American Association of Colleges of Nursing (AACN)** is working with schools, policy makers, nursing organizations, and the media to bring attention to this healthcare concern. AACN is leveraging its resources to shape legislation, identify strategies, and form collaborations to address the shortage. To keep stakeholders abreast of the issues, this fact sheet has been developed along with a companion webresource.

Current and Projected Shortage Indicators

☐ According to the Bureau of Labor Statistics' *Employment Projections* 2016-2026, Registered Nursing (RN) is listed among the top occupations in terms of job growth through 2026. The RN workforce is expected to grow from 2.9 million in 2016 to 3.4 million in 2026, an increase of 438,100 or 15%. The Bureau also projects the need for an additional 203,700 new RNs each year through 2026 to fill newly created positions and to replace retiring nurses.

☐ In the July 2017 *Journal of Nursing Regulation*, Dr. Peter Buerhaus and colleagues examine the "Four Challenges Facing the Nursing Workforce in the United States," which include the accelerating rate of RN retirements. The researchers project that one million RNs will retire by 2030 and that "the departure of such a large cohort of experienced RNs means that patient care settings and other organizations that depend on RNs will face a significant loss of nursing knowledge and expertise that will be felt for years to come."

☐ According to the "United States Registered Nurse Workforce Report Card and Shortage Forecast" published in the January 2012 issue of the *American Journal of Medical Quality,* a shortage of registered nurses is projected to spread across the country between 2009 and 2030. In this state-by-state analysis, the authors forecast the RN shortage to be most intense in the South and the West.

☐ In October 2010, the Institute of Medicine released its landmark report *on The Future of Nursing*, initiated by the Robert Wood Johnson Foundation, which called for increasing the number of baccalaureate-prepared nurses in the workforce to 80% and doubling the population of nurses with doctoral degrees. The current nursing workforce falls far short of these recommendations with only 56% of RNs prepared at the baccalaureate or graduate degree level.

☐ In July 2010, the Tri-Council for Nursing released a joint statement on *Recent Registered Nurse Supply and Demand Projections*, which cautioned stakeholders about declaring an end to the nursing shortage. The downturn in the economy has led to an easing of the shortage in many parts of the country, a recent development most analysts believe to be temporary. In the statement, the Tri-Council raises serious concerns about slowing the production of RNs given the projected demand for nursing services.

Contributing Factors Impacting the Nursing Shortage

Nursing school enrollment is not growing fast enough to meet the projected demand for RN and APRN services.

Though AACN reported a 3.7% enrollment increase in entry-level baccalaureate programs in nursing in 2018, this increase is not sufficient to meet the projected demand for nursing services, including the need for more nurse faculty, researchers, and primary care providers.

A shortage of nursing school faculty is restricting nursing program enrollments.

- According to AACN's report on *2018-2019 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing*, U.S. nursing schools turned away more than 75,000 qualified applicants from baccalaureate and graduate nursing programs in 2018 due to insufficient number of faculty, clinical sites, classroom space, and clinical preceptors, as well as budget constraints. Almost two-thirds of the nursing schools responding to the survey pointed to a shortage of faculty and/or clinical preceptors as a reason for not accepting all qualified applicants into their programs.

A significant segment of the nursing workforce is nearing retirement age.

- According to a 2018 survey conducted by the National Council of State Boards of Nursing and The Forum of State Nursing Workforce Centers, 50.9% of the RN workforce is age 50 or older.

- The Health Resources and Services Administration projects that more than 1 million registered nurses will reach retirement age within the next 10 to 15 years.

Changing demographics signal a need for more nurses to care for our aging population.

- Issued in May 2014, the U.S. Census Bureau report on *An Aging Nation: The Older Population in the United States* found that by 2050, the number of US residents age 65 and over is projected to be 83.7 million, almost double its estimated population of 43.1 million in 2012. With larger numbers of older adults, there will be an increased need for geriatric care, including care for individuals with chronic diseases and comorbidities.

Insufficient staffing is raising the stress level of nurses, impacting job satisfaction, and driving many nurses to leave the profession.

- In the July 2017 issue of *BMJ Quality & Safety*, the international journal of healthcare improvement, Dr. Linda Aiken and her colleagues released findings from a study of acute care hospitals in Belgium, England, Finland, Ireland, Spain, and Switzerland, which found that a greater proportion of professional nurses at the bedside is associated with better outcomes for patients and nurses. Reducing nursing skill mix by adding assistive personnel without professional nurse qualifications may contribute to preventable deaths, erode care quality, and contribute to nurse shortages.

- In the March 2005 issue of *Nursing Economic$,* Dr. Peter Buerhaus and colleagues found that more than 75% of RNs believe the nursing shortage presents a major problem for the quality of their work life, the quality of patient care, and the amount of time nurses can spend with patients. Looking forward, almost all surveyed nurses see the shortage in the

future as a catalyst for increasing stress on nurses (98%), lowering patient care quality (93%) and causing nurses to leave the profession (93%).

High nurse retirement and turnover rates are affecting access to health care.

- In the September 21, 2015 issue of *Science Daily*, healthcare economist David Auerbach released findings from a new study, which found that almost 40% of RNs are over the age of 50. "The number of nurses leaving the workforce each year has been growing steadily from around 40,000 in 2010 to nearly 80,000 by 2020. Meanwhile, the dramatic growth in nursing school enrollment over the last 15 years has begun to level off."

- In September 2007, Dr. Christine T. Kovner and colleagues found that 13% of newly licensed RNs had changed principal jobs after one year, and 37% reported that they felt ready to change jobs. These findings were reported in the *American Journal of Nursing* in the article "Newly Licensed RNs' Characteristics, Work Attitudes, and Intentions to Work."

Impact of Nurse Staffing on Patient Care

Many scientific studies point to the connection between adequate levels of registered nurse staffing and safe patient care.

- In the February 2014 issue of the *Lancet*, Linda Aiken and colleagues published findings from a study conducted in European hospitals, which found that an increase in a nurses' workload by one patient increased the likelihood of dying within 30 days of admission by 7%. The researchers also found that every 10% increase in bachelor's degree nurses was associated with a decrease in patient mortality by 7%.

- In a study published in the journal *BMJ Quality & Safety* in May 2013, researcher Heather L. Tubbs-Cooley and colleagues observed that higher patient loads were associated with higher hospital readmission rates. The study found that when more than four patients were assigned to an RN in pediatric hospitals, the likelihood of hospital readmissions increased significantly.

- In the August 2012 issue of the *American Journal of Infection Control*, Dr. Jeannie Cimiotti and colleagues identified a significant association between high patient-to-nurse ratios and nurse burnout with increased urinary tract and surgical site infections. In this study of Pennsylvania hospitals, the researchers found that increasing a nurse's patient load by just one patient was associated with higher rates of infection. The authors conclude that reducing burnout can improve the well-being of nurses and the quality of patient care.

- In a study publishing in the April 2011 issue of *Medical Care*, Dr. Mary Blegen and her colleagues from the University of California, San Francisco found that higher nurse staffing levels were associated with fewer deaths, lower failure-to-rescue incidents, lower rates of infection, and shorter hospital stays.

- In March 2011, Dr. Jack Needleman published findings in the *New England Journal of*

Medicine, which indicate that insufficient nurse staffing was related to higher patient mortality rates. These researchers analyzed the records of nearly 198,000 admitted patients and 177,000 eight-hour nursing shifts across 43 patient-care units at academic health centers. The data show that the mortality risk for patients was about 6% higher on units that were understaffed as compared with fully staffed units. In the study titled "Nurse Staffing and Inpatient Hospital Mortality," the researchers also found that when a nurse's workload increases because of high patient turnover, mortality risk also increases.

☐ In a study published in the April 2010 issue of *Health Services Research*, Dr. Linda Aiken and colleagues found that lower patient-nurse ratios on medical and surgical units were associated with significantly lower patient mortality rates. The study is titled "Implications of the California Nurse Staffing Mandate on Other States."

☐ In the June 2009 issue of the *International Journal of Nursing Studies*, a research team lead by Dr. Koen Van den Heede found a significant association between the number of baccalaureate-prepared RNs on cardiac care units and in-hospital mortality. Data analyzed by this international team of researcher that included representatives from Belgium, Canada, the Netherlands, and the United States showed that there were 4.9 fewer deaths per 1,000 patients on intensive care units staffed with a higher percentage of nurses with bachelor's degrees.

☐ A growing body of research clearly links baccalaureate-prepared nurses to lower mortality and failure-to-rescue rates. Studies published in the journals *Health Services Research* in August 2008 and the *Journal of Nursing Administration* in May 2008 confirm the findings of several previous studies which link education level and patient outcomes. Efforts to address the nursing shortage must focus on preparing more baccalaureate- prepared nurses in order to ensure access to high quality, safe patient care.

☐ In March 2007, a comprehensive report initiated by the Agency for Healthcare Research and Quality was released on *Nursing Staffing and Quality of Patient Care*. Through this meta-analysis, the authors found that the shortage of registered nurses, in combination with an increased workload, poses a potential threat to quality. Increases in registered nurse staffing was associated with reductions in hospital-related mortality and failure to rescue as well as reduced length of stays. In settings with inadequate staffing, patient safety was compromised.

☐ A shortage of nurses prepared at the baccalaureate level is affecting health care quality and patient outcomes. In a study published September 24, 2003 in the *Journal of the American Medical Association (JAMA)*, Dr. Linda Aiken and her colleagues at the University of Pennsylvania identified a clear link between higher levels of nursing education and better patient outcomes. This extensive study found that surgical patients have a "substantial survival advantage" if treated in hospitals with higher proportions of nurses educated at the baccalaureate or higher degree level. In hospitals, a 10% increase in the proportion of nurses holding BSN degrees decreased the risk of patient death and failure to rescue by 5%.

Efforts to Address the Nursing Shortage

☐ Many statewide initiatives are underway to address both the shortage of RNs and nurse educators. For example, in January 2014, the University of Wisconsin (UW) announced the $3.2 million Nurses for Wisconsin initiative — funded through a UW System Economic Development Incentive Grant — to provide fellowships and loan forgiveness for future nurse faculty who agree to teach after graduation. This program was launched in response to projections that Wisconsin could see a shortage of 20,000 nurses by 2035.

☐ Nursing schools are also forming strategic partnerships and seeking private support to help expand student capacity. For example, the University of Minnesota announced a partnership with the Minnesota VA Health Care System in June 2013 to expand enrollment in the school's BSN program. With a focus on enhancing care to veterans, the VA committed $5.3 million to the university to expand clinical placement sites, fund additional faculty, and support interprofessional engagement.

☐ In September 2010, AACN announced the expansion of NursingCAS, the nation's centralized application service for RN programs, to include graduate programs. One of the main reasons for launching NursingCAS was to ensure that all vacant seats in schools of nursing are filled to better meet the need for nurses and faculty. In 2018, more than 49,000 vacant seats were identified in baccalaureate and graduate nursing programs. NursingCAS provides a way to fill these seats and maximize educational capacity.

☐ In July 2010, the Robert Wood Johnson Foundation (RWJF) released its *Charting Nursing's Future* newsletter focused on Expanding America's Capacity to Educate Nurses. This policy brief describes the capacity innovations of 12 partnerships that are effectively addressing the nursing and nurse faculty shortages. Among the policy recommendations advanced in this brief are requiring all new nurses to complete a BSN program within 10 years of licensure and enhancing the pipeline into baccalaureate and graduate programs.

☐ Since February 2002, Johnson & Johnson has sustained the *Campaign for Nursing's Future*, a multimedia initiative to promote careers in nursing and polish the image of nursing. This multimillion dollar effort includes television commercials, a recruitment video, a Web site, brochures, and other visuals.

Last Update: April 2019

Appendix G: APN Competencies

Essentials for Doctoral Education for Advanced Nursing practice (AACN, 2006).

I. Scientific underpinnings for practice
II. Organizational and system leadership for quality improvement and systems thinking
III. Clinical scholarship and analytical methods for evidence-based practice
IV. Information systems/technology and patient care technology for the improvement and transformation of health care
V. Health Care Policy for advocacy in health care
VI. Interprofessional collaboration for improving patient and population health outcomes
VII. Clinical prevention and population health for improving the nation's health
VIII. Advance nursing practice.

National Organization of Nurse Practitioner Faculties, NP Core Competencies Curriculum Content (NONPF, 2017)

I. Scientific Foundation Competencies
II. Leadership Competencies
III. Quality Competencies
IV. Practice Inquiry Competencies
V. Technology and Information Literacy Competencies
VI. Policy Competencies
VII. Health Delivery System Competencies
VIII. Ethics Competencies
IX. Independent Practice Competencies

National Association of Clinical Nurse Specialists Core competencies (NACNS, 2010)

I. Direct Care Competency
II. Consultation Competencies
III. System Leadership Competency
IV. Collaboration Competency
V. Coaching Competency
VI. Research Competency
VII. Ethical Decision Making, Moral Agency and Advocacy Competency

Appendix H: Course Outlines

NUA Scientific Foundations of Nursing Practice 3 credits (Essential I, III)

(Starting the foundations of the DNP project)

This course will investigate and analyze the scientific foundations of nursing knowledge. Students will use knowledge from other sciences and disciplines to create a context to expand the scientific underpinnings of nursing. Students will explore the nature of theory and theory development from multiple scientific and psychosocial disciplines including middle range theory. Students will also explore concept analysis and to examine the principles and laws that govern the human experience and well-being.

Course objectives:

- Integrate nursing science with knowledge from other disciplines including knowledge with foundations in ethical, biophysical, psychosocial, and analytical foundations.
- Comprehend the nature of theory construction and process and use in health care and health care delivery.
- Apply science based theory to determine the nature and significance of health and health care delivery.
- Apply science based theories to describe actions and strategies to ameliorate, alleviate and enhance health and health care delivery.
- Develop a solid foundation of concept analysis in relation to health and health care delivery.

NUB Health Care Policy and Ethics 3 credits (Essential II, V, VII) 30CH

This course will explore health care policy and the associating role and actions that health care policy's effects health care organizations, health care governance, global and societal practice as well as individual practice. Overview of health care policy and planning at a local, state, and federal level with be examined in consideration to vulnerable populations and community health. Legislative structure and regulatory organizations and the interrelationship with health care organizations and practice will be examined. The APN role will be examined with regards to the ethical and legal considerations regarding practice.

- Examine issues and trends that affect health care delivery in the United States
- Evaluate health care policy and the implications related to patients, communities, vulnerable populations, and society in both the US and other countries.
- Explore the potential roles and outcomes that a DNP can affect in health care legislation and policy.
- Identify ethical dilemmas that may arise when caring for patients, communities, vulnerable populations, and society in both the US and other countries.
- Critically reflect on care options for ethical dilemmas that may arise when caring for patients, communities, vulnerable populations, and society in both the US and other countries.

NUC Qualitative Research (Existing WCSU Course) 3 credits (Essential I, III)

This course will examine an in-depth analysis of the methodologies congruent with selected qualitative research traditions. Strategies for selecting appropriate research questions, sampling, data collection and data analysis plans from the viewpoint of a naturalistic paradigm are highlighted.

- Develop and critically evaluate research questions within the framework of selected qualitative research traditions
- Critically evaluate selected qualitative research designs for their usefulness in addressing nursing education research questions
- Compare and contrast the advantages and disadvantages of selected sampling plans in qualitative research
- Evaluate the effectiveness of various data collection plans and procedures in qualitative research
- Differentiate between credible and non-credible methods of assessing trustworthiness in qualitative research
- Analyze selected data analysis strategies to summarize and interpret qualitative findings

NUD Quantitative Research 3 credits (Essential I, III)

This course will examine an in-depth analysis of inferential statistics. Students will learn key concepts in inferential statistic methodology, commonly used statistical test to be used in nursing and health care research. Students will also develop a basic understanding of tools and statistical software packages that can be used in health care research.

- Explain key concepts in inferential statistics
- Critically evaluate quantitative research designs.
- Discuss specific sampling methods for use in Evidence based practice.
- Interpret statistical result based on various statistical methods.
- Identify potential health outcome actions based on statistical analysis interpretation.
- Develop a plan for data collection, evaluation and management of a nursing or health care research project.

NUE Quality, Risk Management and use of Biostatistics 3 credits (Essential II, IV, VII) 40 CH

(Development of project need)

This course will explore quality analysis methods for identification and the use of data elements in exploring the delivery of patient care. Concepts of risk management and organizational mitigation will be assessed. This information will be used to assist in the delivery of quality care as well as understanding and identifying potential risk associated with organizations. Students will apply biostatical information in evaluating health care quality, risk, and evidence-based practice.

- Evaluate and monitor patient care and quality outcomes in a health care setting.
- Evaluate quality outcomes and patient care indicators in a health care information system.
- Apply the concepts of risk management to a health care organization
- Analyze information as the foundation to support evidence-based practice
- Demonstrate understanding of the principles of quality management that are in line with National Patient Safety Goals.

- Apply the bio statistical research of quality and risk management to that of evidence-based practice to

NUF Analysis of literature and EBP 2 credits (Essential I, III)

(Development of Literature review)

This course will foster an inquiry of scholarship in health care, public health, and population health nationally and globally. Students will be prepared to evaluate all levels of evidence and apply this knowledge to future research endeavors. Using the foundation of analytical research methods students will apply their knowledge to critically appraise evidence from multiple sources.

- Evaluate qualitative studies related to topics of global, community and population health
- Evaluate quantitative studies related to topics of global, community and population health
- Evaluate methods for examining evidence-based practice literature.
- Discuss levels of evidence and how they relate to the students practice project
- Develop plans for dissemination of personal research

NUG Epidemiology 3 credits (Essential, IV, V, VII) 10 CH

This course will introduce students to methods used by epidemiologist to assess health and disease trends. Community health and population health will be examined with an acute and chronic focus to identify population disease trends globally. Focus will include historical background. Methods for identifying health trends, public health, health promotion, determinates of health, environment and occupational health and cultural diversity in health nationally and globally.

- Discus the basic concepts of epidemiology
- Identify basic epidemiologic measures
- Describe the purpose of epidemiological surveillance and measures
- Identify public health interventions and health public health screening programs
- Describe how epidemiological findings shape health care policy
- Discuss epidemiological findings on a global nature.

NUH Leadership in Health Care Organizations 3 credits (Essential II, V) 30 CH

(Existing WCSU course)

The various leadership roles in academic and health care nursing are examined. Classic and contemporary leadership and management theories and research in academic and health care administration are used as a basis to discuss the leadership challenges and opportunities inherent in faculty and health care leadership and in administrative roles. Traditional and emerging roles and responsibilities in the various leadership positions will be explored in depth.

- Evaluate the evolution of the leadership role through various stages of professional development as a leader in a health care setting.
- Identify different leadership theories for use in various health care settings.
- Analyze the impact of contextual factors (e.g. economic, social, and political) on nursing and their impact on health care organizations

- Evaluate the various roles and responsibilities of nursing leaders in health care settings and in global, community and population health.
- Analyze the opportunities and challenges for nursing leaders in health care organizations.

NUI Business and Health Care Technology 3 credits (Essential II, IV, V, VII) 30CH

This course will introduce students to business leadership and management. Organizational Strategic planning including mission and vision development will be undertaken for business entrepreneurship. Students will develop an understanding of health care financing and implications for health care organizations. Students will understand the complexity of health care decisions in macro and micro systems.

- Evaluate health care organization leadership in relation to product outcome
- Analyze leadership styles and how they affect overall health care organizations and functions
- Develop a strategic plan including mission, vision, values, goals, business model, product analysis and gap and market analysis.
- Examine the impacts of legal, ethical, regulatory, and financial principles on health care organizations.
- Identify potential concerns with business operations on a global, societal and population health level.

NUJ Chronic health Care/vulnerable populations 4 credits (Essential V, VI, VII, VIII) 100 CH

(Development of Research Methodology)

This course will prepare the student in the synthesizing of knowledge from physiological, psychological, sociological, cultural, ethnical, and financial perspectives for care of the chronically ill and vulnerable patient. Complex health, social, ethical, and financial problems will be managed for this chronic and vulnerable patient population. Advanced nursing practice will be completed with supervised clinical practice.

- Describe current clinical trends and EBP with patients of chronic illness.
- Identify vulnerable populations and their access to health care.
- Apprise ethical issues that arise with chronic and vulnerable populations
- Appraise and regulatory, legislative, and financial implications of providing health care to chronically ill and vulnerable populations.
- Enhance clinical decision-making abilities and practice in the complex care of chronic and vulnerable populations.
- Demonstrate advanced clinical competency in care of the chronic and vulnerable populations.
- Develop expertise in the dimension of practice for the chronic and vulnerable patient populations.

NUK Community Health and Population health 4 credits (Essential V, VI, VII, VIII) 100 CH

This course will prepare the doctoral student in understanding population and global health issues that affect the multicultural patients of today. Students will identify health disparities on a local, national, and global level. Students will understand the burden of disease with focus including social, cultural, political, economic contexts. Finally, students will explore multidisciplinary approaches to solving complex health problems of community and population health.

- Describe health determinates and health disparities locally, nationally, and globally.
- Identify the sociopolitical aspects of community, global and population health.
- Compare and contrast health care issues of different community and populations.
- Appraise and regulatory, legislative, and financial implications of providing health care for communities locally, nationally, and globally.
- Expand clinical decision-making abilities and practice for communities and population health.
- Demonstrate advanced clinical competency in community and population health.
- Develop expertise in the dimension of practice for population health.

<u>NUL Project Seminar 6 credits (Essential VII, VIII) 160 CH</u>

Under the guidance of faculty DNP students will complete development of the DNP Project with the acquired theoretical knowledge and skills gained. Focus will be in guiding student's aspects of project design, implementation, and evaluation. Students will then evaluate methods for project dissemination to further build upon evidence-based knowledge of health care.

- Use scientific foundations for project assessment and development
- Develop, implement, and evaluate evidence-based knowledge to identify a clinical project problem
- Develop, implement, and evaluate a clinical project
- Identify potential barriers to project completion and evaluation of project results.
- Explore venues for dissemination of research.

Appendix I: Department of Nursing Bylaws

WESTERN CONNECTICUT STATE UNIVERSITY

School of Professional Studies Department of Nursing By-Laws

Article I: Name

The name of this organization shall be the Department of Nursing; hereinafter referred to the

Department.

Article II: Purpose

    a. The general purpose of this Department shall be to provide a vehicle through which the Department membership may participate in academic and personnel matters pertaining to the Department, the School, the University, and the Nursing profession.
    b. Specific responsibilities of the Department shall include curriculum and program development. defining and redefining course contents; determining curriculum and programs of study within the discipline of nursing; evaluation of the performance of Department members; establishment and administration of policies on admission and academic standing in its program; instruction; scholarship; community service.

Article III: Membership

    a. Membership in the Department shall consist of full-time faculty.
    b. Voting members are all full-time tenured faculty or full-time faculty in a tenure track position holding the rank of at least Assistant Professor
    c. Part-time faculty may attend Department meetings but have no vote.
    d. Lab Clinical Coordinator may attend Department meetings but have no vote.

Article IV: Officers

Section 1. The officers of the Department shall be a Chair, Undergraduate Program Coordinator, RN-BS Program Coordinator, Master's Program Coordinator, and Doctoral Program Coordinator. All officers shall be full time members of the Department. The election of Chair, Undergraduate Program Coordinator, RN-BS Coordinator, shall be conducted in odd years. The election of Master's Program Coordinator and Doctoral Program Coordinator shall be conducted in even years.

Section 2. Chair

    a. The Chair has the dual responsibility of leading the Department in fulfilling its responsibilities in academic and personnel areas and of facilitating the functioning of the Department.
    b. The Chair is the official spokesperson for the Department
    c. The Chair shall be elected by the full-time members of the Department for a two-year term. The election shall be held in February proceeding the academic year in office. Following the election, the name of the Chair shall be forwarded to the Dean of the School of Professional Studies, as the President's designee, for appointment to the office
    d. The general procedure for election of Chair, agreed to by the University Senate and the President shall be followed for the position of Chair. The candidates for the office of Chair must hold:
        1. The rank of Assistant Professor or above
        2. A full-time tenure-track appointment
        3. At least one graduate degree in nursing

       4.   An earned academic doctoral degree
- e. The specific Departmental procedure for election of the Chair shall be:
  1. A willingness-to-serve query will be sent electronically to all eligible faculty members by the Faculty Affairs Committee by the first Monday in February
  2. A ballot will be constructed by the Committee containing the names of all eligible faculty members expressing a willingness to serve and distributed to all faculty for an electronic vote by the second Monday in February
  3. The ballot shall be submitted by the fourth Monday in February
  4. The Committee will tally the ballots and report the results of the election within 48 hours
  5. No write-in candidate(s) will be counted
  6. The Chair will be elected by a majority vote of all full-time faculty members who are eligible to vote
  7. If the needed majority of votes are not attained, the voting will continue until a Chair is elected.
- f. The Chair shall assume those responsibilities defined in the CSU-AAUP Collective Bargaining Agreement, the Faculty Handbook and in accord with Departmental practices.
  1. In instances where the Chair is temporarily absent and unable to fulfill designated responsibilities, the Undergraduate Program Coordinator shall assume the Chair's functions. If the chair is absent for more than 30 days, or resigns before the term is completed, an Acting Chair shall be elected by all full-time faculty who are eligible to vote, to serve in the Chair's absence or serve the remainder of that term.
  2. The Chair shall be an ex-officio member of all Departmental committees except the Department Evaluation Committee.
- g. The Chair will assume the new term July 1, or as agreed upon by the outgoing and incoming Chairs.

Section 3. Undergraduate Program Coordinator

- a. The Undergraduate Program Coordinator shall assist the Chair in the management of the undergraduate program.
- b. The Undergraduate Program Coordinator shall be elected for a two-year term. The election shall be held in February, proceeding the academic year in office.
- c. The candidate for the office of Undergraduate Program Coordinator must hold:
  1. The rank of Assistant Professor or above
  2. A full-time tenure-track appointment
  3. At least one graduate degree in nursing.
- d. The specific Departmental procedure for election of the Undergraduate Program Coordinator shall be:
  1. A willingness-to-serve query will be sent electronically to all eligible faculty members by the Faculty Affairs Committee by the first Monday in February.
  2. A ballot will be constructed by the Committee containing the names of all eligible faculty members expressing a willingness to serve and distributed to all faculty for an electronic vote by
the second Monday in February
  3. The ballot shall be submitted by the fourth Monday in February
  4. The Committee will tally the ballots and report the results of the election within 48 hours
  5. No write-in candidate(s) will be counted
  6. The Undergraduate Program Coordinator will be elected by a majority vote of all full-time faculty who are eligible to vote
  7. If the needed majority of votes are not attained, the voting will continue until a Coordinator is elected.

e. The Undergraduate Program Coordinator works in consultation with the Chair and other coordinators, and performs such tasks as delegated by the Chair and in accord with Departmental practices.

f. The Undergraduate Program Coordinator serves as Chair of the Undergraduate Student Committee.

g. In instances where the Undergraduate Program Coordinator is temporarily absent and unable to fulfill designated responsibilities, the Chair will appoint a qualified faculty member to serve in an acting capacity on a temporary basis.

h. In instances where the Undergraduate Program Coordinator becomes unable to continue the responsibilities of the office, the Faculty Affairs Committee shall hold an election to complete present term.

Section 4. RN-BS Program Coordinator

a. The RN-BS Program Coordinator shall assist the chair in the management of the RN-BS degree completion program.

b. The RN-BS Program Coordinator shall be elected for a two-year term. The election shall be held in February proceeding the academic year in office.

c. The candidates for the office of RN-BS Coordinator must hold:
   1. The rank of Assistant Professor or above
   2. A full-time tenure-track appointment
   3. At least one graduate degree in nursing

d. The specific Departmental procedure for election of the RN-BS Program Coordinator shall be:
   1. A willingness-to-serve query will be sent electronically to all eligible faculty members by the Faculty Affairs Committee by the first Monday in February
   2. A ballot will be constructed by the Committee containing the names of all eligible faculty members expressing a willingness to serve and distributed to all faculty for an electronic vote by the second Monday in February
   3. The ballot shall be submitted by the fourth Monday in February
   4. The Committee will tally the ballots and report the results of the election within 48 hours
   5. No write-in candidate(s) will be counted
   6. The RN-BS Program Coordinator will be elected by a majority vote of all full- time faculty who are eligible to vote
   7. If the needed majority of votes are not attained, the voting will continue until a Coordinator is elected.

e. The RN-BS Program Coordinator works in consultation with the Chair and other coordinators, and performs such tasks as delegated by the Chair and in accord with Departmental practices.

f. The RN-BS Program Coordinator shall review and recommend policies concerning the articulation of Registered Nursing students in the program; be the vehicle of communication between students and faculty to facilitate interpretation of matriculation agreements; and be responsible for overseeing the administration of validation examinations.

g. In instances where the RN-BS Program Coordinator is temporarily absent and unable to fulfill designated responsibilities, the Chair will appoint a qualified faculty member to serve in an acting capacity on a temporary basis.

h. In instances where the RN-BS Program Coordinator becomes unable to continue the responsibilities of the office, the Faculty Affairs Committee shall hold an election to complete present term.

Section 5. Master's Program Coordinator

a. The Master's Program Coordinator shall assist the chair in the management of the Master's Program

b.   The Master's Program Coordinator shall be elected for a two-year term. The election shall be held in February, proceeding the academic year in office.

c.   The Master's Program Coordinator must hold:

    1.   The rank of an Assistant Professor or above

    2.   A full-time tenure-track appointment

    3.   At least one graduate degree in nursing

    4.   An earned academic doctoral degree

d.   The specific Departmental procedure for election of the Master's Program Coordinator shall be:

    1.   A willingness-to-serve query will be sent electronically to all eligible full-time faculty members by the Faculty Affairs Committee by the first Monday in February

    2.   A ballot will be constructed by the Committee containing the names of all eligible faculty members expressing a willingness to serve and distributed to all eligible faculty for an electronic vote by the second Monday in February

    3.   The ballot shall be submitted by the fourth Monday in February;

    4.   The Committee will tally the ballots and report the results of the election within 48 hours

    5.   No write-in candidate(s) will be counted

    6.   The Master's Program Coordinator will be elected by a majority vote of all full- time faculty who are eligible to vote

    7.   If the needed majority of votes are not attained, the voting will continue until a Coordinator is elected

e.   The Master's Program Coordinator works in consultation with the Chair and other coordinators, and performs such tasks as delegated by the Chair and in accord with Departmental practices.

f.   The Master's Program Coordinator serves as Chair of the Master's Student Committee

g.   In instances where the Master's Program Coordinator is temporarily absent and unable to fulfill designated responsibilities, the Chair will appoint a qualified faculty member to serve in an acting capacity on a temporary basis.

h.   In instances where the Master's Program Coordinator becomes unable to continue the responsibilities of the office, the Faculty Affairs Committee shall hold an election to complete present term.

Section 6. Doctoral Program Coordinator

a.   The Doctoral Program Coordinator shall assist the chair in the management of the Doctorate of Education in Nursing Education Program.

b.   The Doctoral Program Coordinator shall be elected for a two-year term. The election shall be held February, proceeding the academic year in office.

c.   The Doctoral Program Coordinator will co-coordinate with the Doctoral Program Coordinator from Southern Connecticut State University (SCSU)

d.   The Doctoral Program Coordinator must hold:

1. The rank of an Assistant Professor or above

2. A full-time tenure-track appointment

3. At least one graduate degree in nursing

4. An earned academic doctoral degree in nursing or related field significant teaching and/or leadership experience in nursing education at the undergraduate and graduate levels

5. Record of scholarly activity and service to and/or leadership activities in professional organizations

e. The specific Departmental procedure for election of the Doctoral Program Coordinator shall be:

1. A willingness-to-serve query will be sent electronically to all full-time members by the Faculty Affairs Committee by the first Monday in February

2. A ballot will be constructed by the Committee containing the names of all eligible faculty members expressing a willingness to serve and distributed to all faculty for an electronic vote by the second Monday in February

3. The ballot shall be submitted/returned by the fourth Monday in February

4. The Committee will tally the ballots and report the results of the election within 48 hours

5. No write-in candidate(s) will be counted

6. The Doctoral Program Coordinator will be elected by a majority vote of all full-time faculty who are eligible to vote

7. If the needed majority of votes are not attained, the voting will continue until a Coordinator is elected.

f. The Doctoral Program Coordinator works in consultation with the Chair and other coordinators, and performs such tasks as delegated by the Chair and in accord with Departmental practices.

g. The Doctoral Program Coordinator serves as Co-Chair of the Doctorate of Nursing Education Collaborative Program/Curriculum Committee.

h. In instances where the Doctoral Program Coordinator is temporarily absent and unable to fulfill designated responsibilities, the Chair will appoint a qualified faculty member to serve in an acting capacity on a temporary basis.

i. In instances where the Doctoral Program Coordinator becomes unable to continue the responsibilities of the office, the Faculty Affairs Committee shall hold an election to complete present term.

Section 7. Removal from Office

Any elected officer in the Department may be removed from office for not fulfilling designated responsibilities. A petition for the removal, signed by at least six full-time, tenure track faculty members shall be sent to the Faculty Affairs Committee who will present it to the full membership for a vote. A two-thirds majority vote of the membership is required to approve the Removal.

Article V. Meetings

a. The Department shall hold at least one regular meeting each month during the academic year, September through May.

b.   Special meetings of the Department shall be held as necessary. A special meeting may be called by the Chair or upon petition of four members of the Department.

c.   Majority vote of those present and voting shall prevail.

d.   Two-thirds of the Department membership shall constitute a quorum at any meeting.

e.   A Recorder shall take the minutes of each departmental meeting.

f.   Each faculty member, except the Chair, shall serve as the Recorder on a rotating basis.

g.   At the discretion of the chair, a secret ballot may be required on any vote at any faculty meeting.

Article VI. Committees

Section 1. Committee Organization

a.   Faculty Affairs Committee shall annually determine Department committee's membership for the next academic year and present the roster at the May department meeting. Whenever possible faculty shall volunteer for membership on committees of interest. When committee assignments are structured, Faculty Affairs Committee shall indicate the convener of the first meeting.

b.   Committees shall meet as necessary during the academic year to fulfill their functions. Majority vote of those present and voting shall prevail. Committees shall report at regular Department meetings.

 c.   The chairperson of each committee shall call meetings; assign a secretary to record minutes; distribute minutes and the annual report to all faculty members, and place a copy of the annual report in the appropriate file. Each committee chair shall present an annual report at the May meeting.

d.   All members of the faculty must serve on at least one department committee.

Section 2. Department Evaluation Committee

a.   The Department Evaluation Committee shall consist of at least five tenured members (must be odd number membership). A faculty member who is serving on the University Promotion and Tenure Committee is not eligible for membership. Any candidate for promotion shall not be eligible for membership on this committee during the year of application. Further criteria for membership as determined by the faculty contract and by the University Senate. The election of members will occur in April preceding the academic year to be served.

b.   The specific Departmental procedure for election of the Department Evaluation Committee shall be:

1.   A ballot will be constructed by the Faculty Affairs Committee containing the names of all eligible faculty members

2.   The ballot will be distributed to faculty for an electronic vote;

3.   The Committee will tally the ballots and report the results of the election;

4.   The faculty members receiving the most votes will be named members of this committee;

5.   In case of a tie vote, there will be run-off election through additional written ballots.

c.   The procedure for the evaluation of teaching faculty for renewal, promotion, tenure, and professional assessment shall be consistent with that determined by the University Senate and CSU-AAUP Collective Bargaining Agreement and approved by the University President.

d.   The Department Evaluation Committee shall share a draft of the DEC evaluation with the member being evaluated at least one week before the DEC evaluation is due in the Dean's office.

e.   Criteria and procedures to evaluate faculty shall be reviewed and revised as necessary by the Department Evaluation Committee. Criteria and procedure recommendations from this committee must be approved by a two -thirds vote of the Department membership.

Section 3. Doctorate of Nursing Education Collaborative Program/Curriculum Committee

a.   Membership

  1.   Chairpersons: Co-Coordinators of Ed.D. Program Committee (one from SCSU, one from WCSU)

  2.   Secretary: Rotating among members

  3.   Faculty: Minimum of 4 faculty members eligible to teach at the graduate level (2 WCSU/ 2 SCSU)

  3.   Student(s): At least 2 doctoral student representatives- (one form SCSU and one from WCSU) (participation limited to curriculum-related discussions; student participation will be restricted when admission & academic standing issues related to specific students are discussed)

b.   Purposes

  1.   Monitor academic progression of doctoral students.

  2.   Monitor trends of admission and attrition.

  3.   Conduct admissions process.

  4.   Regularly review Policies Governing Academic and Professional Responsibilities of SCSU and WCSU Doctoral Program and recommend changes to department faculty as necessary.

  5.   Recommend policies governing admission to doctoral program based on current or projected trends in doctoral nursing education.

  6.   Review proposals for curriculum development or revision submitted by doctoral faculty members.

  7.   Review submitted course proposals for adherence to SCSU and WCSU University's Graduate Council guidelines. Review current literature related to curriculum methods/trends in doctoral nursing education and present findings to SCSU and WCSU Department of Nursing Committees.

  8.   Present recommendations related to curriculum development or revision to SCSU and WCSU Department of Nursing Committees for approval.

  9.   Review current trends and best practices in on-line distance education and make recommendations for improvement of course offerings to faculty.

  10. Plan and coordinate three residency programs for doctoral students.

  11. Monitor dissertation progression of students.

  12. Coordinate educational/training programs related to on- line education for faculty and student

c.   Quorum

Majority of members

d.   Voting Privilege All members

e.   Meeting Schedule

Monthly and as needed to meet purposes of committee

Section 4. Faculty Affairs Committee

a.   The Faculty Affairs Committee shall consist of at least three members of the Department.

b.   The purpose of this committee shall be to address faculty related issues to include but not be limited to professional development, facilitating scholarly activities, managing faculty searches, and conducting elections for the offices of the Department of Nursing, and Department Evaluation Committee in accord with the provisions of these By-Laws.

c.   This committee shall bring all recommendations to the faculty for review and acceptance.

d.   Faculty Affairs Committee reserves the right to require an electronic ballot when such is deemed necessary.

Section 5. Learning Resources Committee

a.   The Learning Resources committee shall consist of at least three members of the Department to include representation from both undergraduate and graduate programs, and the Lab Clinical

Coordinator.

b.   This committee shall evaluate current program resources at the undergraduate and graduate program levels. This includes educational media, laboratory supplies, equipment, and replenishing these as needed.

c.   This committee shall collaborate with library services to develop and maintain library resources.

 d.   The committee shall distribute annual reports to faculty including laboratory, technology, and library updates.

Section 6. Master's Student Committee

a.   The Master's Student Committee shall consist of at least three members of the Department, with one member who teaches in the BS program. The Master's Coordinator shall chair the committee.

b.   The purpose of this committee shall be to address master's student-related issues, including but not limited to admission, readmission, retention, transfer, and scholarship awards.

c.   The committee shall bring all recommendations to the full faculty for review and acceptance

Section 7. Programs Committee

a.   The Programs Committee shall consist of the Chair, program coordinators, and at least two additional faculty members.

b.   The purpose of this committee shall be to address program related issues to include but not be limited to program philosophy and outcomes, nursing course content, supporting courses, clinical experiences, and program development and evaluation.

c.   The committee shall bring all recommendations to the faculty for review and acceptance prior to submission to any University committee.

Section 8. Special Committees

a.   Special Committees shall be appointed by the Chair of the Department for specific purposes as needed. Each of these committees shall fulfill its charge in the time requested, and then disband.

b.   The Special Committee shall make recommendations directly to the Chair and report to the full faculty.

c.   By a two-thirds vote of the Department membership, the entire Department may become a committee of the whole for any committee listed in Sections 2 through 7 for a specific purpose and a specific time duly recorded in the Department meeting minutes.

Section 9. Undergraduate Student Committee

a.   The Undergraduate Student Committee shall consist of at least five members of the Department, with one member who teaches in the RN to BS program. The Undergraduate Coordinator shall chair the committee.

b.   The purpose of this committee shall be to address all undergraduate student-related issues, including but not limited to admission, readmission, retention, transfer, and scholarship awards.

 c.   The committee shall bring all recommendations to the faculty for review and acceptance.

Article VI. Parliamentary Authority

Most recent edition of Robert's Rules of Order shall be used in determining questions of parliamentary procedure.

 Article VIII. Change to By-Laws

a.   These By-Laws may be amended at any Department meeting by a two-thirds vote of the members present at such a meeting, provided that one month's written notice has been given to the membership.

b.   These By-laws may be amended by nine-tenths of the membership at any department meeting if no previous notice has been given.

c.   These By-Laws will be reviewed every three years or as necessary.

<div align="right">Reviewed November 2017</div>

<div align="right">Approved November 8, 2017</div>

Appendix J: Budget

CONNECTICUT BOARD OF REGENTS FOR HIGHER EDUCATION CSCU APPLICATION FOR NEW PROGRAM APPROVAL

PRO FORMA Budget - Resources and Expenditures Projections (whole dollars only) (3 pages)

PROJECTED Enrollment	First Year						Second Year						Third Year					
	Fall		Spring		Summer		Fall		Spring		Summer		Fall		Spring		Summer	
	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT
Internal Transfer (from other programs)																		
New Students (first time matriculating)		11						9						10				
Continuing Students				11		11		9		18		18		7		17		17
Headcount Enrollment		11		11		11		18		18		18		17		17		17
Total Estimated FTE per Year[1]						8.25						15.0						13.91

PROJECTED Program Revenue	First Year						Second Year						Third Year					
	Fall Semester		Spring Semester		Summer		Fall Semester		Spring Semester		Summer		Fall Semester		Spring Semester		Summer	
	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT
Tuition[2]		42,966		42,966		116,952		100,008		83,340		218,898		98,736		85,184		203,487
Tuition from Internal Transfer[2]																		
Program Specific Fees (lab fees, etc.)																		
Other Revenue (annotate in narrative)																		
Total Annual Program Revenue	$202,884						$402,246						$387,407					

PROJECTED Program Expenditures[3]	First Year	Second Year	Third Year	NOTE: Existing regulations require that: "an application for a new program shall include a complete and realistic plan for implementing and financing the proposed program during the first cycle of operation, based on projected enrollment levels; the nature and extent of instructional services required; the availability of existing resources to support the program; additional resource requirements; and projected sources of funding. If resources to operate a program are to be provided totally or in part through reallocation of existing resources, the institution shall identify the resources to be employed and explain how existing programs will be affected. Reallocation of resources to meet new and changing needs is encouraged, provided such reallocation does not reduce the quality of continuing programs below acceptable levels."
Administration (Chair or Coordinator)[4]	36,396	38,800	41,379	
Faculty (Full-time, total for program) [4]	90,884	177,720	189,631	1 1 FTE = 12 credit hours for undergraduate programs; 1 FTE = 12 credit hours for graduate programs; both for Fall & Spring
Faculty (Part-time, total for program) [4]	18,303	57,809	61,484	Formula for conversion of part-time enrollments to Full-Time Equivalent (FTE): Divide part-time enrollment by 3, and round to the nearest tenth - for example 20 part-time enrollees equals 20 divided by 3 equals 6.67 or 6.7 FTE.
Support Staff lab or grad assist, tutor)				
Library Resources Program				2 Revenues from all course's students will be taking.
Equipment (List in narrative)				3 Capital outlay costs, instructional spending for research and services, etc. can be excluded.
Other[5]	3,000	3,000	3,000	4 If full-time person is solely hired for this program, use rate time; otherwise, use a percentage. Indicate if new hires or existing faculty/staff. Record Salary and Fringe Benefits, accordingly.
Estimated Indirect Costs[6]	44,948	84,202	88,412	5 e.g. student services. Course development would be direct payment or release time; marketing is cost of marketing that program separately.
Total Expenditures per Year	$193,531	$361,531	$383,906	6 Check with your Business Office – community colleges have one rate; the others each have their own. Indirect Cost might include such expenses as student services, operations, and maintenance.

Cost of curriculum development was supported by contractual Summer Curriculum funds and is not included here. The work is complete. Summer tuition reflects two summer sessions. Indirect costs are based on the federal guidelines for grants. While we do not anticipate any particular investment requirements at this time, this allows us to fund additional student support or other educational enhancements as the program grows.

Appendix K: Program Assessment Plan

The DNP curriculum was developed using the National Organization of Nurse Practitioner Faculties (NONPF) Nurse Practitioner Core Competencies Curriculum Content (NONPF, 2014), the National Association of Clinical Nurse Specialists Core competencies (NACNS) (NACNS, 2010), and the Essentials for Doctoral Education for Advanced Nursing practice (AACN, 2006). Program and course objectives are linked to these documents. Students will be required to start and maintain a DNP portfolio as a method to evaluate when all the program outcomes and competencies have been met.

Students are graded using the standard graduate nursing program grade distribution from Western Connecticut State University. Students must maintain a grade of a B or better to pass a course. Couse syllabi are the formal documents for student to be informed of their assignments, grading practice and grading rubrics. Evaluations for each course can be formative, summative or a combination.

Grading criteria: The DNP nursing students must maintain a B average in order to graduate from the program. Should a student achieve a grade below a B- in a course, that course must be repeated, and the student must achieve a grade of B- or better to progress in the program.

Department of nursing grades are assigned as follows:

A = 92 – 100	B- = 80-82	D+ = 68-70
A- = 89 – 91	C+ = 77-79	D = 64-67
B+= 86- 88	C = 74-76	D- = 63-60
B = 83- 85	C- = 71-73	F = Below 60

Clinical evaluations will be completed by both the preceptors and the faculty. A student evaluation tool will be used by the preceptors at both the midterm and the end-of-semester for evaluation of the student (Appendix N). Preceptors will also provide the students with their feedback. All grading of clinical is completed by the faculty. Remediation plans are to be utilized by the faculty in conjunction with the preceptor. Student evaluation forms of the preceptor and clinical site will be completed by the student at the end of the semester and faculty will complete an overall clinical site evaluation of each clinical site at the end of each semester. Faculty members will have contact with the preceptors throughout the semester and if possible onsite visits of clinical sites will be made by faculty.

Evaluations for the DNP project are out lined in Appendix M. The student will progress through the initial stages of appraisal of the literature and development of implementation and methodology. The student will then do a DNP project defense for the DNP committee. Students will then obtain the necessary IRB approval. Students will complete their research with a faculty and site mentor (if completed on a particular site). After data collection students will complete their projects with results, conclusions and suggestions for future practice and studies. Students will then complete a final DNP project defense.

Program evaluation will be assessed by graduate exit surveys (Appendix O). Alumni surveys will be sent to new DNP graduates 1 and 3 years after graduation. Results from these surveys will be evaluated by the DNP committee and appropriate program and course changes will be made. These changes will then be brought to the programs committee and the faculty of the department of nursing for review. Once

approved by the programs committee and the nursing department faculty, they will be presented to graduate counsel for review and approval.

Appendix L: Portfolio Guidelines and Assessment Criteria

DNP students are also required to complete a DNP Portfolio. Students will maintain a DNP portfolio for the duration of the program. The portfolio will showcase the students work and will demonstrate achievement of program outcomes and competencies. The DNP portfolio will include work completed in each course as well as project work required for each course. DNP portfolios should be placed in three ring binders with section dividers. Examples of Sections for the DNP portfolio are as follows:

Section 1: Your personal statement or letter of interest for a job and your resume

Section 2: This should be a list of all your theoretical accomplishments, items in this section can be papers, projects, and any schooling you have obtained.

Section 3: This should be a list of all your clinical accomplishments, items in this section can be awards, conference attendance and CEU, and clinical log time. Include your clinical evaluations.

Section 4: Licensure and accreditation, this section contains copies of any certifications and license that you have obtained.   This includes your CPR certification and any other certifications obtained.

Section 5: Provide examples of the project work you have done.   You can also include any reflections that may demonstrate your knowledge of patient care, as well as other examples of how you met the program outcomes and DNP competencies.

Appendix M: DNP Project Outline and Assessment Criteria

The DNP Project proposal will start to take shape during the first semester of course work. Throughout the program students will progress with their DNP projects while receiving guidance from course faculty with regards to proposal development including oral presentations. Student will be required to submit a DNP Project Team Appointment or Change form when they have decided on DNP team members. Students should refer to the DNP final evaluation guidelines to be used by all DNP faculty during the proposal and final presentation session. Students are encouraged to align their proposals with the Standards for Quality Improved Reporting Excellence Guidelines (SQUIRE), found at:

http://squire-statement.org/index.cfm?fuseaction=page.viewpage&pageid=471

Suggested project organization: Student will receive guidance from faculty regarding the development of their DNP proposal, including both the written project and the oral presentation. Students should reference the proposal and final evaluation guidelines for further guidance. A suggested organization of a DNP project proposal is listed below.

- Proposal
    - Title Page with copy write
    - Abstract
    - Table of contents
    - Table of figures or graphs
- Section 1
    - Introduction to the problem
    - Background of the problem
    - Theoretical Framework
    - Purpose and Rational
    - Practice question in a PICO format
- Section 2
    - Systematic review of the literature and Evidence Based Practice
    - Summarize the findings
    - Identify Gaps
    - Implications for practice
    - Implications for research
    - Rational of project based on literature Review
- Section 3
    - Setting
    - Sample
    - Describe the planned intervention
    - Describe the Procedures
    - Describe Human Protection
    - Data Management
        - Outcomes to be measured

- - Collection
  - Analysis
  - Evaluation strategies other
- Section 4
  - Summary of Problem and question
  - Findings with Analysis
    - Including outside findings
  - Barriers Encounter and Solutions
- Section 5
  - Implications for practice
  - Implications for nursing
  - Suggestions for future research

DNP Project Proposal Presentation: Students are to present their DNP proposal to the DNP team in attendance (live or virtual), students should provide any material and copies of the proposal electronically to faculty two weeks in advance of the presentation.

DNP Project Proposal Approval Process: After presentation, the student will be asked to leave the room so the DNP faculty can discuss the defense. Evaluation of the defense will be completed on the DNP Project Proposal Evaluation Framework (below). The team will identify and changes or addition work that may need to be required. The DNP faculty member will explain the needed changes to the student. If no revisions are necessary than the student will have the DNP Project Proposal Approval Form completed which will then be submitted to the program coordinator and the director of the nursing department. If revisions are necessary than the student with the guidance of the DNP faculty member will process the changes needed and then complete the form.

Conducting the DNP Project: Once the DNP project team has approved the proposal, the student will complete the IRB process at the university. This must be completed before data collection. After IRB approval at the university students must obtain administrative approval at the outside agency where the project is to be conducted. Students will also have to obtain IRB approval at outside agencies that will be used in the data collection.

Funding DNP projects: Students who develop projects with a principle investigator who has obtained grant funds must secure permission for copyrighting of their project. IT is advisable to reach an understanding at the onset about authorship and credit for publication. Manuscripts submitted that represent student-led project should have the student listed as first author.

Final DNP Products: The DNP final product will include a project Brief or Poster, the DNP presentation, and the DNP Project Manuscript, along with the DNP portfolio. These will be required to showcase the achievements of the program outcomes and competencies. The DNP degree will be awarded after successful completion of all products.

DNP Project Brief/Poster: The DNP Project brief or Poster presentation is to provide a synopsis of the project in order to encourage sustainability and further research. The brief is a written scholarly description of the project overview, the evidence supporting the project, the project scope, methods, results, and implications. Poster presentations will include the same information as a project brief.

Students will submit an electronic version of the brief or poster to the DNP team. DNP team members will have two weeks to provide feedback.

Suggested DNP brief/poster Organization:

- Title Page
- Summary/Abstract
- Practice question
- Significance of the Problem
- Summary of the Evidence
- Project Implementation Strategies
- Barriers encountered and solutions
- Findings with analysis
- Implications
- Reference
- Any budget justification.

DNP Project Final Presentation: Students will prepare a Power point presentation for the DNP team. This Power Point presentation will be used for the DNP final evaluation presentation. Students are to submit the presentation to the DNP two weeks before presentation. Team members will have two weeks to provide feedback and suggestions. Students are to present their DNP final presentation to the DNP team in attendance (live or virtual). After presentation, the student will be asked to leave the room so the DNP faculty can discuss the final presentation. Evaluation of the presentation will be completed on the DNP Project Final Evaluation Framework (below). The team will identify and changes or addition work that may need to be required. The DNP faculty member will explain the needed changes to the student. If no revisions are necessary than the student will have the DNP Project Final Evaluation Approval Form completed which will then be submitted to the program coordinator and the director of the nursing department. If revisions are necessary than the student with the guidance of the DNP faculty member will process the changes needed and then complete the form.

DNP Project Manuscript: A manuscript of publishable quality is expected as a final product of the DNP project.

DNP Project Proposal Evaluation Framework

Student's Name _____

Title of DNP Project: _____

Grading:

- 1= very poorly done   2 = poorly done   3 = Good
- 4 = Very Good   5 = Excellent

Did candidate address each component?

Components	1	2	3	4	5	Comments
Background information with literature that demonstrates the need and supports the problem						
Literature review that supports the significance and relevance of the problem or proposed project or intervention						
Need, feasibility and significance are clearly presented.						
Problem and purpose clearly described.						
Scope of the project is realistic						
The theoretical/conceptual framework is described and applicable.						
Literature, supporting data and benchmarks are provided and summarized						
Project objectives stated and measurable						
Congruency of organizations mission/vision and strategic plan is described if applicable						
Action items and methods are clearly described and rational						
The setting and sample are clearly described						
Implementation methods, tools and methods described.						
Additional resources support and risks or threats identified.						
Analysis and Evaluation plan described.						
Human protection identified						
Informed Consents present and meet human subject requirements.						
Tentative agreement approvals for site study in place if applicable (Letter of agreement)						
Time frame feasible						

Overall evaluation:

- Accept proposal with no changes

- Accept proposal with minor revisions and no review

Changes are to be made by the student and will be submitted to the DNP project faculty advisor for review. Once approved by faculty advisor then the DNP Project Proposal Approval Form can be completed, and study carried out.

- Accept proposal with minor revision and re-review

Student must develop a significantly revised proposal. The DNP Project Team will review the new proposal and all prior steps will be repeated.

- Reject proposal

Name   **Signature**   **Date**

Please circle your role:

Faculty advisor   Secondary Advisor   Third Advisor

Program Coordinator   Director of Nursing Department

DNP Project Proposal Approval Form

Student's Name _____

Title of DNP Project: _____

Faculty Advisor   Signature   Date

Secondary Advisor   Signature   Date

Third Advisor   Signature   Date

Program Coordinator   Signature   Date

DNP Project Final Evaluation Framework

Student's Name _____

Title of DNP Project: _____

Grading:

- 1= very poorly done   2 = poorly done   3 = Good
- 4 = Very Good   5 = Excellent

Did candidate address each component?

Components	1	2	3	4	5	Comments
Background information with literature that demonstrates the need						
Literature review that supports the significance and relevance of the problem or proposed project or intervention						
Need, feasibility and significance are clearly presented.						
Problem and purpose clearly described.						
Scope of the project is realistic						
The theoretical/conceptual framework is described and applicable.						
Literature, supporting data and benchmarks are provided and summarized						
Project objectives stated and measurable						
Congruency of organizations mission/vision and strategic plan is described if applicable						

Action items and methods are clearly described and rational					
The setting and sample are clearly described					
Implementation methods, tools and methods described.					
Additional resources support and risks or threats identified.					
Analysis and Evaluation of plan coherent and consistent with project plan					
Evaluation linked to objectives					
Outcomes and evidence-based measures appropriate to objectives					
Method of analysis is clear and described for each measurement					
Findings are organized and appropriate					
Findings are linked to the problem statement, purpose, and evaluation plan					
Described which objectives where achieved and or not achieved					
Addressed key facilitators and barriers that impacted the project's outcomes					
Described any unintended consequences					
Recommendations and implications addressed for problem statements,					

supporting organization, key stakeholders.					
Included recommendations related to identified facilitators and barriers					
Addressed any follow up consequences of project					
Where goals and aims of the project met					
Did candidate analyze the issue with an APN lens					
Did candidate integrate scientific curiosity					
Candidate demonstrated practice inquiry skills including translating evidence					
Candidate engaged in collaborative partnerships in project implantation					

Overall evaluation:

- Accept proposal with no changes

- Accept proposal with minor revisions and no review

Changes are to be made by the student and will be submitted to the DNP project faculty advisor for review. Once approved by faculty advisor then the DNP Project Proposal Approval Form can be completed, and study carried out.

- Reject proposal

Name   **Signature**   **Date**

Please circle your role:

Faculty advisor   Secondary Advisor   Third Advisor

Program Coordinator   Director of Nursing Department

Appendix N: Clinical Competency Evaluation Tool

Clinical Evaluation Tools

Western Connecticut State University

DNP Clinical Evaluation Tool   **Preceptor**
Name: _____

                                                                         Agency

Name_____

                                                                         Course #:

__---------------------------------------_____

COMPETENCY-BASED CLINICAL EVALUATION TOOL

S = Meets expectations for this level of student

NI = Needs Improvement

NA/O = not applicable/not observed

Students are not expected to meet all competencies during each clinical rotation but should strive to meet all prior to graduation from the DNP program.

DNP Essentials of Practice	S	NI	NA/O	*Preceptor Comments*
Essential #1 Scientific Underpinnings for Practice				
Integrate nursing science with knowledge from ethics, the biophysical, psychosocial, analytical, and organizational sciences as the basis for the highest level of nursing practice.				
Use science-based theories and concepts to:				
Determine the nature and significance of health and health care delivery phenomena;				
Describe the actions and advanced strategies to enhance, alleviate, and ameliorate health and health care delivery phenomena as appropriate; and evaluate outcomes.				
Develop and evaluate new practice approaches based on nursing theories and theories from other disciplines.				
Essential #2: Organizational and Systems Leadership for Quality Improvement and Systems Thinking				
Develop and evaluate care delivery approaches that meet current and future needs of patient populations based on scientific findings in nursing and other clinical sciences, as well as organizational, political, and economic sciences.				

Ensure accountability for quality of health care and patient safety for populations with whom they work:			
Use advanced communication skills/processes to lead quality improvement and patient safety initiatives in health care systems.			
Employ principles of business, finance, economics, and health policy to develop and implement effective plans for practice-level and/or system-wide practice initiatives that will improve the quality of care delivery.			
Develop and/or monitor budgets for practice initiatives.			
Analyze the cost-effectiveness of practice initiatives accounting for risk and improvement of health care outcomes.			
Demonstrate sensitivity to diverse organizational cultures and populations, including patients and providers.			
Develop and/or evaluate effective strategies for managing the ethical dilemmas inherent in patient care, the health care organization, and research.			
Essential #3: Clinical Scholarship and Analytical Methods for Evidence-Based Practice			
Use analytic methods to critically appraise existing literature and other evidence to determine and implement the best evidence for practice.			
Design and implement processes to evaluate outcomes of practice, practice patterns, and systems of care within a practice setting, health care organization, or community against national benchmarks to determine variances in practice outcomes and population trends.			
Design, direct, and evaluate quality improvement methodologies to promote safe, timely, effective, efficient, equitable, and patient-centered care.			
Apply relevant findings to develop practice guidelines and improve practice and the practice environment.			

Use information technology and research methods appropriately to:
    a. Collect appropriate and accurate data to generate evidence for nursing practice
    b. Inform and guide the design of databases that generate meaningful evidence for nursing practice
    c. Analyze data from practice
    d. Design evidence-based interventions
    e. Predict and analyze outcomes
    f. Examine patterns of behavior and outcomes
    g. Identify gaps in evidence for practice			

Function as a practice specialist/consultant in collaborative knowledge-generating research.			
Disseminate findings from evidence-based practice and research to improve healthcare outcomes			
Essential #4: Information Systems /Technology and Patient Care Technology for the Improvement and Transformation of Health Care			
Design, select, use, and evaluate programs that evaluate and monitor outcomes of care, care systems, and quality improvement including consumer use of health care information systems.			

Analyze and communicate critical elements necessary to the selection, use and evaluation of health care information systems and patient care technology.			
Demonstrate the conceptual ability and technical skills to develop and execute an evaluation plan involving data extraction from practice information systems and databases.			
Provide leadership in the evaluation and resolution of ethical and legal issues within healthcare systems relating to the use of information, information technology, communication networks, and patient care technology.			
Evaluate consumer health information sources for accuracy, timeliness, and appropriateness.			
Essential #5: Health Care Policy for Advocacy in Health Care			
Critically analyze health policy proposals, health policies, and related issues from the perspective of consumers, nursing, other health professions, and other stakeholders in policy and public forums.			
Demonstrate leadership in the development and implementation of institutional, local, state, federal, and/or international health policy.			
Influence policy makers through active participation on committees, boards, or task forces at the institutional, local, state, regional, national, and/or international levels to improve health care delivery and outcomes.			
Educate others, including policy makers at all levels, regarding nursing, health policy, and patient care outcomes.			
Advocate for the nursing profession within the policy and healthcare communities.			
Develop, evaluate, and provide leadership for health care policy that shapes health care financing, regulation, and delivery.			
Advocate for social justice, equity, and ethical policies within all healthcare arenas.			
Essential #6: Interprofessional Collaboration for Improving Patient and Population Health Outcomes.			
Employ effective communication and collaborative skills in the development and implementation of practice models, peer review, practice guidelines, health policy, standards of care, and/or other scholarly products.			
Lead interprofessional teams in the analysis of complex practice and organizational issues.			
Employ consultative and leadership skills with intraprofessional and interprofessional teams to create change in health care and complex healthcare delivery systems.			
Essential # 7: Clinical Prevention and Population Health for Improving the Nation's Health			
Analyze epidemiological, biostatistical, environmental, and other appropriate scientific data related to individual, aggregate, and population health.			
Synthesize concepts, including psychosocial dimensions and cultural diversity, related to clinical prevention and population health in developing, implementing, and evaluating interventions to address health promotion/disease prevention efforts, improve health			

status/access patterns, and/or address gaps in care of individuals, aggregates, or populations.				
Evaluate care delivery models and/or strategies using concepts related to community, environmental and occupational health, and cultural and socioeconomic dimensions of health				
Essential #8: Advanced Nursing Practice				
Conduct a comprehensive and systematic assessment of health and illness parameters in complex situations, incorporating diverse and culturally sensitive approaches.				
Design, implement, and evaluate therapeutic interventions based on nursing science and other sciences.				
Develop and sustain therapeutic relationships and partnerships with patients (individual, family or group) and other professionals to facilitate optimal care and patient outcomes				
Develop and sustain therapeutic relationships and partnerships with patients (individual, family or group) and other professionals to facilitate optimal care and patient outcomes				
Guide, mentor, and support other nurses to achieve excellence in nursing practice.				
Educate and guide individuals and groups through complex health and situational transitions				
Use conceptual and analytical skills in evaluating the links among practice, organizational, population, fiscal, and policy issues.				

Please indicate below:

1.   Strengths of student:

2.   Weaknesses of student:

3.   General Comments about student's performance:

4.   Recommendations to address identified weaknesses:

Total Semester Hours

Student Signature_____   Date_____

Preceptor Signature _____   Date_____

Faculty Signature_____   Date_____

Appendix O: Student Feedback Tool

WESTERN CONNECTICUT STATE UNIVERSITY

Department of Nursing

Doctorate of Nursing Practice Program Evaluation

Part I. General Information

Directions: Please answer the following questions about your educational characteristics. The information will be kept confidential and will only be used to prepare a general profile of WCSU graduates.

1. Clinical Nurse Specialist _____   Adult Nurse Practitioner____

2. Since graduation from the DNP program I have:

__ Received a professional honor/award

__ Delivered a scholarly or professional presentation

__ Taught in an approved Continuing Education workshop

__ Participated in the conduction of a research project

__ Published an article or book chapter

___ Presented your Capstone Project

___ Other: -----------_____

3. I currently hold membership in:

__ CTAPRNS   __ Sigma Theta Tau

__ Specialty Professional Organization   __ WCSU Alumni Association.

__ Other, please specify _____

4. Number of days I have attended continuing education workshops, conferences, or institutes since graduation. _____

5. I subscribe to the following professional journals: _____

_____

6. My current educational/research activities are:

   __ Currently enrolled in other educational degree   ____ Online CEU

   -__ Actively involved in research   ____ Professional Conferences

7. Work status: Numbers of hours per week_____

8. Current type of employer

   ___Ambulatory care   ___Home health/Community health

   ___Hospital   ___ Long term care/In patient rehab

   ___Private Practice   ___ Academics

10. Current type of position:

   ___nurse manager   ____ Nurse educator

   ___staff nurse   ____Nurse Practitioner

   ___Clinical Nurse Specialist   ____Project coordinator/manager

11. Geographic location of current employment: _____

Part II. DNP Program Evaluation

Please indicate your level of agreement to the following statements by circling the response that best represents your opinion.

SA. Strongly Agree   A. Agree   N. Neutral   D. Disagree   SD. Strongly Disagree

Overall,	

1. The DNP program prepared me for practice inquiry?	SA A N D SD
2. My clinical experiences at university-affiliated agencies provided many valuable learning opportunities.	SA A N D SD
3. Faculty members were concerned about my education.	SA A N D SD
4. Faculty members were concerned about me as a student.	SA A N D SD
5. The computer resources of the university were helpful in my learning.	SA A N D SD
6. The Library resources were helpful to my learning.	SA A N D SD
7. The Capstone Project was a valuable learning experience?	SA A N D SD
8. I am satisfied with the quality of education I received in WCSU DNP program	SA A N D SD
The following questions relate to the DNP curriculum	
9. The DNP program prepared me to work with diverse, vulnerable, and underserved populations.	SA A N D SD
10. The DNP program prepared me to improve health care quality.	SA A N D SD
11. The DNP program prepared me to evaluate and influence health care systems?	SA A N D SD
12. The DNP program prepared me to evaluate and transfer scientific research to clinical decision-making in practice.	SA A N D SD
13. The DNP program improved my ability to collaborate with other health care partners and colleagues.	SA A N D SD
14. The DNP program provided comprehensive understanding of clinical coordination of care, case management and complex health-care systems.	SA A N D SD
15. The DNP program met my educational goals for this degree.	SA A N D SD
16. The DNP program enhanced my use of complex strategies, interventions, and teaching to promote, maintain, and improve health and prevent illness and injury.	SA A N D SD
17. The DNP Program increased my use of evidence-based practice in the clinical setting.	SA A N D SD
18. The DNP program increased my competence in leadership, quality improvement, managing data and evaluating data.	SA A N D SD
19. The DNP program improved my use of data and information systems to provide meaningful use that affects clinical data in health care systems.	SA A N D SD

20. The DNP program has improved my knowledge of clinical scholarship and dissemination of my Capstone project.	SA A N D SD
21. The DNP program enhanced my knowledge as a leader and role model for the professional development of peers, colleagues, and others.	SA A N D SD
22. The DNP program increased my participation in advocacy memberships that support the profession of nursing.	SA A N D SD
23. The DNP program advanced my understanding and participation of health care policy, business, and the role of policy makers in my area of clinical practice.	SA A N D SD
24. Please evaluate the extent to which the following courses were beneficial: NU**A** Theory and concept analysis NU**B** Health care policy and ethics NU**C** Qualitative Research NU**D** Quantitative Research NU**E** Quality, Risk management and use of biostatistics NU**F** Analysis of literature and EBP NU**G** Epidemiology NU**H** Leadership in Health Care Organizations NU**I** Business and health care technology NU**J** Chronic health Care/vulnerable populations NU**K** Community Health/population health NU**J** Project seminar	SA A N D SD SA A N D SD SA A N D SD SA A N D SD SA A N D SD SA A N D SD SA A N D SD SA A N D SD SA A N D SD SA A N D SD SA A N D SD SA A N D SD SA A N D SD

Part III. Additional Questions/Comments

1. Were there additional class content you believe should have been included as a student to prepare you for your DNP role?

2. Were there additional clinical experiences you believe you should have had as a DNP student to prepare you for your role in DNP practice?

3. Additional Comments

Thank you for your very important contribution

Appendix P: WCSU Online Policy

I. INSTITUTIONAL POLICY ISSUES

    A. Purpose:

        1. The purpose of Western Connecticut State University (WCSU) Online Learning Policy is to assure high quality in online/distance learning with regard to instruction, procedures, and support. Unless otherwise stated all academic policies and procedures apply to both on-campus and online courses. Nevertheless, the particular nature and circumstances of online learning necessitate a clear explication of policies and procedures on key areas. All Online Learning policies are generated and executed in accordance with the mission of WCSU.

    B. Principles of Good Practice For Electronically Offered Academic Degree And Certificate Programs:

        1. Distance learning activities at WCSU comply with the NEASC Guidelines for the Evaluation of Distance Education & On-line Learning and with the Guidelines of other accrediting bodies.

        2. See: Http://cihe.neasc.org/downloads/Pp90_Guidelines_for_the_Evaluation_of_Distance Education_On-line_Learning_.pdf (Now NECHE)

        3. WCSU's goal is to ensure that online courses meet the same quality standards as courses taught on campus. Additionally, some online learning may address the needs or topic in ways that on-campus classes cannot.

    C. Definition

        1. **Online Course**: Defined as one in which course content is delivered online via the University's web-based course management system, whether synchronously or asynchronously. Students submit course work and participate in discussions with faculty and other students via the Internet. Many online courses contain media-rich presentations that reinforce important concepts. Students in these courses communicate with faculty and fellow students using e-mail, discussion boards, and submit assignments to faculty through the University' web-based course management system.

        2. **Hybrid Course**: Defined as one in which a course is comprised of both face-to-face meetings and online learning, where the online component does not exceed 50% of the designated instructional time. All face-to-face meetings for a hybrid course will be announced prior to registration. The online component is delivered via the University's web-based course management system.

    D. Review of Distance Learning Policy:

        1. The responsibility for evaluating and revising the Online Learning Policy resides with the Senate Distance Learning Committee, as specified by NECHE.

II. CURRICULUM AND INSTRUCTION

    A. Academic Integrity of Online Learning Courses:

        1. Online learning courses are comparable to campus-based courses in terms of:

            a. Syllabi

    b. Office Hours

    c. Expected learning outcomes

    d. Readings and assignments

    e. Grading

    f. Methods of evaluation

    g. Student Opinion Survey

  2. Online learning courses are subject to the same policies as stated in the Graduate and Undergraduate Catalogs for campus-based courses. Faculty members must also follow the regulations described in the Collective Bargaining Agreement and the guidelines in the Faculty Handbook.

B. Oversight Of Courses:

  1. Like all academic activities, online learning at WCSU operates under the purview of the Provost and Vice President for Academic Affairs, CUCAS and Grad Council. WCSU adheres to the policy that all courses of the same prefix and number are equivalent, regardless of mode of delivery and/or period of delivery. It is the responsibility of the faculty to ensure that the rigor of programs and quality of instruction are maintained within their courses.

C. Online Learning Course Offering Process

  1. For new online offerings, the faculty member must complete the Online Education at WCSU course offering form. Form approval must be provided by the Department Chair, Academic Dean, and Provost. This process should be done as expediently as possible. See: http://www.wcsu.edu/academics/online.asp

D. Instructional Review: Quality of Instruction Issues

  1. Instruction in all courses, whether campus-based or online is reviewed by the same criteria set forth in the AAUP-CBA, the Faculty Handbook and Departmental Bylaws.

  2. Criteria will include, but will not be limited to, evaluation of teaching effectiveness and student opinion surveys. Evaluators may need special training and support to adequately review online instruction due to the distinct pedagogical implications that must be considered when looking at online teaching and learning strategies and processes.

  3. See: DEC Written Evaluation and Recommendation Report for Teaching Faculty Members.

  4. Faculty Interaction with Students:

  5. As in all classes, best practices in online learning necessitate clear guidelines on faculty student interaction. Online and hybrid courses require strong instructor presence and frequent interactions with students. Faculty should clarify in their syllabi and course polices the nature of planned interaction, feedback timelines (like grading or email turnaround), as well as appropriate modes of communication (e-mail, phone, fax, chat, or discussion board.) Faculty should ensure clear responses to students, within a student-friendly timeframe. Complete and detailed feedback should be provided via the

discussion board, individual email or other appropriate means. Office hours shall be held in compliance with the Faculty Handbook. Depending on the nature of the course, some may want to provide synchronous office hours when students know faculty can be reached by methods such as VoIP (Voice Over Internet Protocol), telephone or email. The instructor is expected to comply with all privacy laws in conducting online and hybrid courses.

E. Faculty Responsibility

1. The instructor is responsible for presenting course content, instruction, and evaluating student progress in online learning courses, as well as for campus-based courses. Rapid changes in technology may require faculty to reevaluate online course resources frequently.

F. Accessibility (ADA):

1. All online learning is conducted in regard to and compliance with the Americans with Disabilities Act. See: http://www.wcsu.edu/accessability/ADAandRA.asp

G. Intellectual Property And Third Party Providers

1. Distance learning courses are frequently designed and disseminated by other colleges, universities, corporations or non-profit organizations. In the event that WCSU wishes to purchase or lease modules or entire courses from a Third Party, such courses or modules must be evaluated by the appropriate curricular committees to ensure that the materials meet all quality criteria set forth by the appropriate curricular committees before any legal agreements are signed between parties.

H. University Honesty Policy

1. Online, hybrid and on-site course instruction follow the same campus-wide policy on Academic Honesty. WCSU affirms its commitment to enforcing the Academic Honesty Policy and to supporting faculty and students in the handling of academic integrity matters. WCSU is committed to making information on academic integrity easy to find on the campus Web sites and within online courses. Departments offering online courses and degrees should include ethics instruction within the relevant course and/or core curricula. WCSU encourages faculty to report every suspected violation of the Academic Honesty Policy and act upon it. (See Academic Honesty Policy.)

I. Copyright Compliance

1. The University acts in accordance with Section 403 of the Digital Millennium Copyright Act. See http://www.copyright.gov/legislation/sec403.pdf

J. Testing Policies: Verifying The Identify Of The Student Submitting Work Online

1. WCSU verifies the identity of students in online classes in accordance with current educational standards. WCSU provides secure student logins and password to access online courses and related resources, discussions, assignments and assessments. Students are provided instruction on maintaining the security of their logins and passwords. WCSU must have processes that establish that the student who registers in a distance or correspondence education course or program is the same student who participates in and completes the program and receives academic credit. Verification methods are

determined by the institution and may include but are not limited to secure login and password protocols, proctored examinations, and new or other technologies and practices.

III. FACULTY

    A. Faculty Qualifications

        1. Faculty members who teach online learning courses must meet the same qualifications as faculty who teach campus-based courses at Western Connecticut State University. They will be selected in accordance with the WCSU Faculty Collective Bargaining Agreement.

    B. Faculty Training

        1. WCSU provides a variety of training workshops and individual training for faculty in the use of all relevant courseware and/or software. Training will be provided as needed to ensure that faculty remain current in the use of the technology. WCSU's Center for Excellence Learning and Teaching (CELT) should offer professional development opportunities for faculty to learn best practices for effective online communication with students

        2. In addition to training and professional development for faculty related to teaching in distance learning formats, the faculty meets periodically to share information and discuss ideas to enhance effectiveness of courses and quality of courses being taught.

    C. Faculty Evaluation

        1. Procedures to be followed for the evaluation of faculty-administration of Student Opinion Surveys and Peer Observations--should follow the guidelines set forth in the CBA, the Faculty Handbook and Departmental Bylaws in as close to the same manner as is possible in online and on- campus courses. The individual DEC's and Department Chairs should be permitted access to online classes in a manner that is comparable to the observation of faculty teaching on-campus classes. Additionally, department curriculum and assessment committees should be permitted access on a limited basis to courses to ensure course quality. Departments should identify assessment procedures for online learning that are consistent with their mission. On site and online courses should be comparable experiences and each department will need to periodically review its courses to assure that approved course learning outcomes are addressed.

    D. Faculty Teaching Load:

        1. Faculty members teaching distance-learning courses receive the same workload credit as faculty who teach campus-based courses.

IV. STUDENT SUPPORT SERVICES

    A. Student Services

        1. All policies covering on-campus classes shall also apply to distance learning classes. This includes matriculation, financial aid, and registration. The WCSU website shall provide information about distance learning orientation sessions as well as all other services online (e.g., financial aid, career development, tutoring services, counseling and academic advising). Students should consult an academic advisor before registering for an online learning class, as well as

campus-based courses. Special attention should be paid to a student's ability to work independently and to perform all or most course work by reading and writing. Students should plan their schedules wisely making sure they have sufficient time to complete an online class within the allotted time. Students must ensure that they will have adequate access to a computer and the internet to complete the class.

B. Student Training

1. It is recommended that all students must complete an orientation to online learning course before registering for their first course. This training will familiarize the student with the instructional software and well as acquaint them with the principles and practices of being a good online student. New student orientation sessions should include training on the university's current-web-based learning management system, as provided by Information Technology & Innovation.

C. Student Complaints/Grievance Procedure

1. All student concerns about grading and other academic concerns should follow established University procedures as set forth in the Student Handbook, the Undergraduate or Graduate Catalog and the Faculty Handbook.

D. Library Resources

1. WCSU Libraries ensure that the distance learning community has access to library materials equivalent to those provided in traditional settings. The Libraries provide convenient, direct access to library materials in appropriate formats that are of sufficient quality, depth, number, scope, and currency to:

    a. meet students' needs in fulfilling course assignments; enrich the academic programs;

    b. meet teaching and research needs; support curricular needs

    c. promote the acquisition of lifelong learning skills;

    d. accommodate students with varying levels of technological access (i.e., low bandwidth); and accommodate other informational needs of the distance learning community as appropriate.

2. Library services offered to the distance learning community are designed to meet a wide range of informational, instructional, and user needs. Services include virtual reference and research assistance (via chat, e-mail, phone, text); online library instruction and informational services (including information literacy instruction); reliable, rapid, secure access to online resources; access to electronic reserve materials, interlibrary loan and document delivery services; and adequate service hours. Library services to the distance learning community will be promoted through variety of channels, including the Library's mobile-enhanced website, and will include documented and updated policies and procedures.

E. University Bookstore

1. The WCSU website provides a link to the WCSU Bookstore (which provides information for both distance learning students and traditional students.) All students may make bookstore purchases using the online service. The bookstore will mail the requested materials to the student.

V. DISTANCE LEARNING FACILITIES AND SUPPORT SERVICES

    A. Distance Learning Equipment and Facilities

        1. Western Connecticut State University provides the necessary equipment and facilities to effectively deliver scheduled synchronous and asynchronous courses at a distance. Video conferencing rooms are available to fully deliver courses. Computers with Internet access are available on campus for students who may need to use campus facilities for distance learning purposes. All courses that require laboratories and clinical site visits, which cannot be completed via technology-based distance learning, are handled with special arrangements made by the faculty member in consultation with the Dean and IT.

    B. Funding for Distance Learning:

        1. Sufficient funds for the operation of online/distance learning programs have been allocated to maintain instructional offerings. The annual University budget provides for the maintenance of equipment and networks the WCSU CIO is responsible for this budget.

    C. Institutional Technology Responsibility:

        1. Information Technology & Innovation provides the technical expertise necessary for maintaining equipment and networks, so that the delivery of online/distance learning programs may occur. A System Administrator addresses student and faculty concerns with the delivery of distance learning and an online Helpdesk is available for equipment problems. In addition, IT&I provides training of faculty and staff. IT&I schedules several training modules for professional development during each year and or as needed. IT&I provides orientation and training modules available online for students.

VI. PLANNING AND EVALUATION

    A. Institutional Planning

        1. The viability of distance learning programs is included in the planning process. Distance learning is planned to meet the University mission, strategic initiatives, goals and objectives, and is consistent with the University long-range planning document. Distance learning is designed and evaluated according to the same guidelines used for on-campus programs. The effectiveness of distance learning is assessed as discussed in this document. Finally, the results of the assessment are used to make appropriate changes to the long-range plan and to the program. Departments offering online courses or programs track the effectiveness of such program through their assessment process.

    B. Educational Effectiveness

        1. Distance learning is designed and evaluated according to the same guidelines used to assess on-campus courses, programs, and departments. The effectiveness of distance learning is assessed based on the accreditation policies described by NEASC and other national and regional accrediting bodies related to specific program areas across the University.

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